

Carmarthenshire County Council

Annual Report

OF THE

County Medical Officer
of Health

For the Year 1958

CARMARTHEN :

Printed by The Journal Co. Ltd.

CONTENTS

	<i>Page</i>
Introduction	4
Committee	5
Public Health Officers	5
Statistics :	
Population	11
Births	11
Infant Mortality	12
Neo-natal Deaths	13
Maternal Mortality	14
Deaths	14
Causes of Death for Age Groups	16
Infant Deaths from Infectious Diseases	16
Cancer Mortality	16
Chief Causes of Death	17
Administration	18
Joint Use of Staff	19
Voluntary Organisations	19
Domiciliary Health Services :	
Elderly Sick and Infirm	20
First Ten Years of National Health Service	20
Care of Mothers and Young Children :	
Expectant and Nursing Mothers	23
Unmarried Mothers and their Children	24
Child Welfare	25
Medical Treatment of Infants	27
Premature Infants	29
Ophthalmia Neonatorum	31
Welfare Foods	31
Dental Care	33
Gynaecological Clinic	33
Family Planning Clinic	33
Child Life Protection	33
Nurseries and Child Minders	33
Domiciliary Midwifery	34
Hospital Provision for Maternity Cases	35
Gas and Air Analgesia	36
Pethidine	36
Trichloroethylene	37
Refresher Courses for Midwives	37
Pupil Midwives	37
Puerperal Pyrexia	37
Supervision of Midwives	37
Health Visiting	38
Student Health Visitors	39
Refresher Courses	39
Home Nursing	39
Prevention of Break-up of Families	41
Vaccination and Immunisation	41
Smallpox Vaccination	42
Diphtheria and Whooping Cough Immunisation	42
B.C.G. Vaccination	44
Poliomyelitis Vaccination	44

	<i>Page</i>
County Ambulance Service	45
Radio Control	48
Prevention of Illness, Care and After-Care	49
Tuberculosis	49
Malignant Disease	50
Travelling Expenses of Relatives	50
Home Help Service	50
Health Education	52
Mental Health Service	53
Lunacy Acts	53
Mental Deficiency Acts	54
Cases on Licence	55
Occupational Training	55
Home Teaching	56
Communicable Diseases	56
Acute Poliomyelitis	57
Laboratory Services	57
Venereal Diseases	57
Tuberculosis	60
County Welfare Services	62
Blind Persons	62
Epileptics and Spastics	63
Milk Control	63
Food and Drugs	64
Sanitary Circumstances	67
Table—Vital Statistics, 1958	68

INTRODUCTION

In general, services continued much as in 1957, and this was in no mean way helped by the efficiency of the day to day running of the Department.

Lately, some sections of the public have become conscious of the need for new services e.g., the education of young people on the dangers of smoking, the prevention of accidents in the home and on the roads; perhaps overeating needs curbing, and some people think boxing ought to be abolished. These may or may not have a medical angle but unless the public feel the need to be helped, I am afraid the position will remain as it is until there is a general awakening of personal responsibilities.

The staffing difficulties of the home nursing and midwifery services owing to lack of recruits will make reorganisation necessary to ensure full use of the midwifery staff available.

It will be noted from the Report that there was a slight increase in births and birth rate with a drop in still-births. However, due to congenital malformations and other defined or ill-defined diseases there has been a sharp increase in infant mortality. I am pleased to report that there were no maternal deaths (excluding abortions) for the second year in succession.

The response to offers of vaccination against poliomyelitis of children under sixteen years of age has been very satisfactory and at the end of the year, 65% of those eligible had received two injections of vaccine.

The response of expectant mothers to the offer of vaccination against poliomyelitis has been poor and the percentage vaccinated at the end of the year is estimated at 16% only. This is most disappointing as vaccination of the expectant mother against poliomyelitis also gives protection to the newborn child in the early part of its life.

The Report contains a brief outline of the first ten years of the National Health Service.

I am grateful for the support and help of the Chairman and Members of the Health and Public Health Committee, and I must record my appreciation of the help and assistance I received from the professional, administrative and clerical staff of the County Health Department.

R. EVANS.

County Medical Officer of Health.

September, 1959.

HEALTH AND PUBLIC HEALTH COMMITTEE, 1958

Chairman : Alderman Edgar Lewis.

Vice-Chairman : Councillor Mrs. M. A. Lewis.

Aldermen :

Evan Bevan.	W. H. Mathias, O.B.E.
Frank Davies.	D. J. Stone.
Thomas Davies.	S. O. Thomas.
Griffith Evans.	T. J. Williams.
John Harries, B.E.M. (<i>ex-officio</i>).	

Councillors :

W. I. Daniel.	Josiah Jones.
D. M. Davies.	Edward Lewis.
G. V. Davies.	Haydn Lewis.
I. T. Davies.	Sidney Lewis.
J. H. Davies.	Dr. H. D. Llewellyn.
W. J. Davies (Llandovery).	T. H. Maguire.
L. Dennis.	John Morgan.
D. Ivor J. Evans.	William Morris.
M. T. Evans, M.B.E.	J. D. Phelps.
T. E. Evans.	W. J. Phillips (Abergwili).
H. H. Harries.	Mrs. C. R. Rees.
Gwyn Howells.	D. J. Richards.
Mrs. Loti Rees Hughes.	S. J. E. Samuel.
Rev. R. G. James.	D. T. Williams.
D. G. J. Jones.	G. O. Williams.
	John Williams.

PUBLIC HEALTH OFFICERS OF THE COUNTY COUNCIL

County Medical Officer of Health and Principal School Medical Officer:
R. Evans, M.D., B.Sc., D.P.H.

Deputy County Medical Officer of Health and Deputy School Medical Officer :

D. G. G. Jones, M.B., B.S., D.P.H.

Principal Dental Officer :

W. E. T. Llewelyn, L.D.S., R.C.S.

Chief Nursing Officer :

Miss M. Evans, S.R.N., S.C.M., H.V.Cert.

Organiser of Home Helps :

Miss Joan M. Crossman.

County Ambulance Officer :

G. B. Evans.

Assistant Medical Officers :

Elizabeth T. Davies-Humphreys, M.R.C.S., L.R.C.P.

D. O. Davies, M.R.C.S., L.R.C.P.

M. G. Danaher, M.B., B.Ch., B.A.O., L.M., D.P.H.

Edna E. Williams, B.Sc., M.B., B.Ch.

J. G. E. Collins, M.R.C.S., L.R.C.P., D.P.H.

C. I. Morgan, M.R.C.S., L.R.C.P.

*E. H. Beynon-Hopkins, M.R.C.S., L.R.C.P., D.P.H. (part-time).

*Gladys M. Herbert, M.R.C.S., L.R.C.P., D.P.H. (part-time).

†Elfyn T. Jones, B.Sc., M.R.C.S., L.R.C.P., D.P.H. (part-time).

Iris A. Jenkin Lloyd, M.R.C.S., L.R.C.P., D.P.H. (part-time).

Audrey A. Jones, M.B., Ch.B. (part-time).

* Divisional Medical Officer of Health.

† District Medical Officer of Health.

Assistant Dental Officers :

J. L. T. Davies, L.D.S., R.C.S.

D. L. Walters, L.D.S., R.C.S.

F. G. Day (temporary).

Gwilym Evans, L.D.S., R.C.S. (part-time).

G. Ungood Griffiths, L.D.S., R.C.S. (part-time). (Ceased 31st July).

Medical Officer of Gynaecological Clinic :

J. Gwendoline Madel, M.R.C.S., L.R.C.P.

Deputy Superintendent Health Visitor :

Miss F. Hughes, S.R.N., S.C.M., H.V.Cert.

Senior Nursing Officer :

Miss N. E. Russell, S.R.N., S.C.M., H.V.Cert. (Ceased 14th June).

Miss R. E. Morris, S.R.N., S.C.M., H.V.Cert. (Commenced 1st September).

Senior Orthopaedic Sister :

Miss E. R. Buckley, M.C.S.P.

Assistant Orthopaedic Sister :

Mrs. O. Turner Evans, M.C.S.P.

Speech Therapist :

Mrs. R. M. Morgan, L.C.S.T.

Assistant Organisers of Home Helps :

Mrs. N. Davies.

Mrs. E. J. Griffiths.

Dental Attendants :

Mrs. V. M. Arundel.

Miss E. B. Evans.

Miss A. M. Maliphant.

Miss M. A. Thomas.

Miss Joyce Jenkins.

Mrs. Florence Evans (part-time).

Mental Health Social Welfare Officer :

D. T. Longhurst.

Duly Authorised Officers for Mental Health.:

*J. A. D. Hopkins.

*D. J. Hughes.

*D. G. Jones.

*D. A. John.

*Esmor Evans.

*D. J. Lewis. (Commenced 10th February).

* Also County Welfare Officers.

Supervisor Llanelly Occupation Centre and Home Teacher for Mental Defectives :

Mrs. M. A. Lewis.

Assistant Supervisors and Home Teachers for Mental Defectives :

Miss J. M. Lester.

D. E. Ambrose.

Mrs. M. Woodliffe (temporary). (Commenced 23rd June).

Home Teachers and Visitors for the Blind :

Miss S. M. Tidmarsh.

Miss A. Young.

Miss Myra Thomas.

County Analyst :

H. J. Evans, B.Sc., F.I.C., F.C.S. (died 18th December).

Inspectors under Food and Drugs Acts :

Chief Inspector—D. R. Watkins.

Deputy Chief Inspector—E. D. Roberts.

Educational Psychologist :

C. B. E. James B.A., B.Ed., A.B.Ps.S.

Consultants available for County Health Services

Pathologist :

Gwenfron M. Griffiths, M.D., M.R.C.P.

Bacteriologist under the Medical Research Council :

M. H. Hughes, M.A., D.M., D.T.M. and H., Dip. Bact. (Ceased 17th January).

H. D. S. Morgan, M.R.C.S., L.R.C.P., Dip. Bact. (Commenced 17th January).

Chest Physicians :

J. T. Jones, B.Sc., M.B., Ch.B.

D. B. Ll. Morgan, M.D.

Assistant Chest Physicians :

J. Williams, M.B., B.Ch.
Bronwen N. Davies, B.Sc., M.B., B.Ch.

Medical Officer of V.D. Clinic :

D. E. Thomas, M.B., B.S.

Obstetricians :

J. R. E. James, M.B., F.R.C.S., F.R.C.O.G.
Rhys M. Williams, M.B., B.S., M.R.C.O.G.

Orthopaedic Surgeons :

G. D. Rowley, M.Ch.
R. L. Rees, F.R.C.S.

Ophthalmic Surgeons :

J. J. Healy, M.B., Ch.B., Llanelly. (Ceased 31st December).
G. S. Forrester, M.B., Ch.B., D.O.M.S., Llanelly.
A. Philipp, L.R.C.P., L.R.C.S., L.R.F.P.S., D.O.M.S., Llanelly.

Ear, Nose and Throat Surgeons :

T. I. Williams, F.R.C.S., Llanelly.
S. Morgan, F.R.C.S., Carmarthen.

Plastic Surgeons :

Eric W. Peet, F.R.C.S., Oxford.
Emlyn Lewis, F.R.C.S., Chepstow.

Paediatrician :

R. T. Jenkins, M.R.C.P., D.C.H., Swansea.

Dermatologist :

D. Leighton Rees, M.D., M.R.C.S., L.R.C.P., Swansea.

Orthodontist :

R. E. Rix, M.R.C.S., L.D.S., R.C.S., London.

Dental Surgeon :

J. R. Gibson, F.D.S., Chepstow.

Psychiatrists :

Sidney Davies, M.B., B.S., D.P.M.
J. Farr, M.B., B.S., B.Ch., D.P.M.
E. J. Eurfyl Jones, M.A., B.M., B.Ch., D.P.M.

Child Psychiatrist :

G. Crosse, M.B., B.S., D.P.M.

NURSING

District.	Name.	Qualifications.
Whole-time Health Visitors :		
Amman Valley	M. G. Evans	S.R.N., S.C.M., H.V.Cert.
Ammanford	A. Howells	S.R.N., S.C.M., H.V.Cert.
Burry Port	R. M. Walters	S.R.N., S.C.M., H.V.Cert.
Trimsaran	G. M. Williams	S.R.N., S.C.M., H.V.Cert.
Llangennech	E. Edwards	S.R.N., S.C.M., H.V.Cert.
St. Clears	M. E. E. Davies	S.R.N., S.C.M., H.V.Cert.
Carmarthen Borough	G. I. Evans	S.R.N., S.C.M., H.V.Cert.
	D. Evans Murray	S.R.N., S.C.M., H.V.Cert.
Llanelly Borough	G. Greene	S.R.N., S.C.M., H.V.Cert.
	D. C. Insley	S.R.N., S.C.M., H.V.Cert.
	G. M. Roberts	S.R.N., S.C.M., H.V.Cert.
	G. M. Burford	S.R.N., S.C.M., H.V.Cert.
	C. Jones	S.R.N., S.C.M., H.V.Cert.
Felinfoel	E. M. Jones	S.R.N., S.C.M., H.V.Cert.
Tumble	E. J. M. Jones	S.R.N., S.C.M., H.V.Cert.
Llandybie	A. E. Jones	S.R.N., S.C.M., H.V.Cert.
Pencader	E. N. Morgan	S.R.N., S.C.M., H.V.Cert.
Bankyfelin	E. N. E. Davies	S.R.N., H.V.Cert.
Llandeilo	C. M. Bailey	S.R.N., S.C.M., H.V.Cert.
Llangendeirne	M. E. Thomas	S.R.N., S.C.M., H.V.Cert.
Llandovery	M. M. Davies	S.R.N., H.V.Cert.
Nantgaredig	E. Evans	S.R.N., S.C.M., H.V.Cert.
Cynwyl Elfed	N. G. E. Baker	S.R.N., S.C.M., H.V.Cert.
Whitland	E. E. Williams	S.R.N., S.C.M., H.V.Cert.

District Nurse/Midwives/Health Visitors :

Llansawel	M. L. Angel	S.R.N., S.C.M.
Cilycwm	E. G. Cox	S.C.M.
Caeo	S. Jenkins	S.C.M., S.E.A.N.

District Nurse/Midwives :

Betws	I. M. Davies	S.R.N., S.C.M., H.V.Cert.
Ammanford	L. M. Davies	S.R.N., S.C.M.
Brynamman	A. James	S.R.N., S.C.M.
Garnant	S. Jones	S.R.N., S.C.M.
Cwmamman	V. Sharp	S.R.N., S.C.M.
Llangennech	L. C. Evans	S.C.M., S.E.A.N.
	M. E. John	S.C.M., S.E.A.N.
Llwynhendy	M. E. Richards	S.R.N., S.C.M.
Laugharne	E. John	S.C.M., S.E.A.N.
St. Clears	S. H. Phillips	S.R.N., S.C.M.
Abernant	M. O. Davies	S.R.N., S.C.M.
Cynwyl Elfed	E. Thomas	S.R.N., S.C.M.
Meidrim and Trellech	(Vacancy)	
Pwll, Sandy and Furnace	A. E. James	S.R.N., S.C.M.
Gorslas	M. E. Evans	S.R.N., S.C.M., S.R.F.N.
Tumble	H. E. A. Ratford	S.R.N., S.C.M., S.R.F.N.
Felinfoel	A. R. Harries	S.R.N., S.C.M.
Dafen	E. M. Thomas	S.R.N., S.C.M., Tb.Cert.
Kidwelly	R. H. Davies	S.R.N., S.C.M.
Llandybie	L. Thomas	S.R.N., S.C.M.
Penygroes	S.E. G. Jones	S.R.N., S.C.M.
Trimsaran	E. M. Thomas	S.R.N., S.C.M.
Saron	G. Edwards	S.R.N., S.C.M.
Tycroes	E. J. Davies	S.R.N., S.C.M.
Llandeilo	G. M. Alcock	S.R.N., S.C.M.
Llanstephan	M. D. Jones	S.R.N., S.C.M.
Llanybyther	D. Thomas	S.R.N., S.C.M.
Pencader	E. Davies	S.R.N., S.C.M.
Drefach	E. A. Jones	S.R.N., S.C.M.

District.	Name.	Qualifications.
Llangunnor	K. E. Critchley ..	S.C.M.
Abergwili	(Vacancy)	
Nantgaredig	D. E. Davies ..	S.C.M., S.E.A.N.
Llandovery	B. Harries ..	S.R.N., S.C.M.
Llangadog	E. J. Powell ..	S.C.M., S.E.A.N.
Llansadwrn and Llanwrda	M. E. Preece ..	S.C.M., S.E.A.N.
Ferryside	M. M. T. Richards Jones	S.C.M., S.E.A.N.
Pontyates	A. M. Walters ..	S.R.N., S.C.M.
Pontyberem	M. B. Harries ..	S.R.N., S.C.M.
Llandeilo (South Ward) ..	E. A. Davies ..	S.R.N., S.C.M.
Talley	(Vacancy)	
Velindre	G. R. Luke ..	S.R.N., S.C.M.
Llanfihangel-Aberbythich	A. M. Pugh ..	S.R.N., S.C.M.
Newcastle Emlyn	V. J. Jones ..	S.R.N., S.C.M.
Whitland	E. H. Davies ..	S.R.N., S.C.M., S.R.F.N.
Llanfynydd and Llangathen	(Vacancy)	
District Nurses :		
Carmarthen	D. M. Jones ..	S.R.N., S.C.M.
	E. G. Thomas ..	S.R.N., S.C.M.
Burry Port	M. J. Davies ..	S.R.N., S.C.M.
Llanelly	M. Marpole ..	S.R.N., S.C.M.
	W. V. Griffiths ..	S.R.N.
	J. B. Tasker ..	S.R.N.
	H. Bushell ..	S.R.N.
	M. Griffiths ..	S.E.A.N.
Llanboidy	E. M. Adams ..	S.R.N.
Whole-time Midwives :		
Llanelly	K. Y. Perrott ..	S.C.M.
	M. David Griffiths	S.R.N., S.C.M.
	M. W. Evans ..	S.C.M.
	E. M. Perrott ..	S.R.N., S.C.M.
Carmarthen	E. M. Evans James	S.C.M.
	E. M. James ..	S.R.N., S.C.M.
Burry Port	O. G. Thomas ..	S.R.N., S.C.M.
Pembrey	M. E. Thomas ..	S.R.N., S.C.M.
Relief District Nurse/Midwives :		
Group 1	D. Buckler ..	S.R.N., S.C.M.
Group 2	(Vacancy).	
Group 3 }	(3 Vacancies).	
Group 4 }		
Group 5	(Vacancy).	
Group 6	(Vacancy).	
Group 7	(Vacancy).	
Group 8	(Vacancy).	
Group 9	(Vacancy).	
Group 10	S. A. N. Price ..	S.R.N., S.C.M.

STATISTICS

Area : 588,472 acres.

Population—Census 1951 : 171,742.

Estimated by Registrar General for 1958 : 169,300.

Product of a penny rate for general purposes : £5,370.

Rateable Value for general purposes : £1,380,880.

In superficial area (588,472 acres) the County of Carmarthen is the largest of the Welsh Counties. Its length from the upper waters of the River Towy to the Pembrokeshire border is 50 miles. Its breadth from the River Teify on the Cardiganshire border to the River Loughor is 35 miles. Something like three-quarters of the area is agricultural, the chief industries apart from agriculture, being Forestry, Stone Quarrying and Milk Processing. The remainder of the County (the south eastern part) is industrial, the chief industries being Coal Mining, Iron and Steel Rolling, Tinplate and Hollow Ware. During the years since the last war, miscellaneous light industries have been introduced, the chief amongst them being Light Precision Engineering and Chemical Manufacture.

Live Births :

			Male		Female		Total
Legitimate	..	..	1155	..	1172	..	2327
Illegitimate	..	..	26	..	41	..	67
Totals	..	..	1181	..	1213	..	2394

Rate per 1,000 of estimated population : 14.14.

The following table shews the number of live births registered and the birth rates during the past five years :—

Year	Urban		Rural		Admin. County		England and Wales	
	No. Reg.	Rate.	No. Reg.	Rate.	No. Reg.	Rate.	Rate.	
1954	.. 902	12.99	.. 1394	13.71	.. 2296	13.42	..	15.2
1955	.. 871	12.68	.. 1402	13.73	.. 2273	13.31	..	15.0
1956	.. 889	13.01	.. 1393	13.65	.. 2282	13.39	..	15.7
1957	.. 868	12.67	.. 1481	14.55	.. 2349	13.79	..	16.1
1958	.. 889	13.07	.. 1505	14.86	.. 2394	14.14	..	16.4

Stillbirths

Male	Female	Total
30	20	50

Rate per 1,000 (Live and Still) Births : 20.46.

Total Live and Still Births : 2,444.

Infant Mortality

There were 85 deaths of infants under one year old during the year; an infant mortality rate of 35.51 per 1,000 live births. This compares with a rate of 29.80 for 1957. For England and Wales for 1958, the rate was 22.6, but the rate for Wales only was 26.6.

A classification of 1958 deaths in the County is as follows :—

	Males	Females	Total	Rate
Legitimate ..	44	40	84	36.09
Illegitimate ..	—	1	1	14.93
Totals ..	44	41	85	35.51

The causes of death were :—

	Male	Female	Total
Influenza	—	1	1
Pneumonia	3	8	11
Gastritis, enteritis and diarrhoea ..	2	—	2
Congenital malformations ..	9	9	18
Other defined and ill-defined diseases ..	29	21	50
Heart Disease	—	1	1
Nephritis and Nephrosis	1	1	2
Totals	44	41	85

Infant mortality in the County for the last six years is summarised in the following table :—

	Legitimate		Illegitimate		Total		England and Wales	Wales only
Year	No.	Rate	No.	Rate	No.	Rate	Rate	Rate
1953	81	34.94	2	22.47	83	34.48	26.8	31.3
1954	66	29.87	3	34.88	69	30.05	25.5	31.5
1955	60	27.29	—	—	60	26.40	24.9	31.4
1956	68	30.85	3	38.46	71	31.11	23.8	28.9
1957	66	28.97	4	52.63	70	29.80	23.0	28.0
1958	84	36.09	1	14.93	85	35.51	22.6	26.6

Neo-Natal Deaths

63 infants under four weeks old died (neo-natal deaths) during the year, a mortality rate of 26.32 per 1,000 live births. This figure was 48 for the previous year, a mortality rate of 20.43.

An analysis of the neo-natal deaths in the County during 1958 is as follows :—

				M.	F.	Total		Rate		
Legitimate	..	..	..	33	..	29	..	62	..	26.64
Illegitimate	..	..	..	—	..	1	..	1	..	14.93
				—		—		—		—
Totals	..	..	..	33	..	30	..	63	..	26.32
				—		—		—		—

Neo-natal deaths in the County for the last five years are summarised in the following table :—

Year	Legitimate		Illegitimate		Total		England and Wales
	No.	Rate	No.	Rate	No.	Rate	Rate
1954	45	20.36	3	34.88	48	20.91	17.7
1955	43	19.55	—	—	43	18.92	17.3
1956	52	23.59	3	38.46	55	24.10	16.9
1957	45	19.16	3	39.47	48	20.43	16.5
1958	62	26.64	1	14.93	63	26.32	16.2

Illegitimate Live Births

Illegitimate live births per cent of total live births : 2.80%.

Maternal Mortality

Maternal Mortality covers the number of deaths in which pregnancy or childbirth was the primary cause of death. One such case occurred in this County during the year 1958. The figures for the last six years are as follows :—

Year.	Maternal Deaths.		Total Births.	Rate per 1,000 total Births.		Rate for England and Wales.	
1953	..	3	..	2460	..	1.2	..
1954	..	2	..	2365	..	0.8	..
1955	..	5	..	2329	..	2.1	..
1956	..	2	..	2353	..	0.8	..
1957	..	—	..	2420	..	—	..
1958	..	1	..	2444	..	0.4	..

Although all abortions are included in the classification of maternal mortality, a truer picture of maternal mortality in the area is obtained by the exclusion of such cases. Maternal deaths in the County for the last six years not due to abortion are summarised in the following table:—

Year.	Total Maternal Deaths excluding Abortions.		Rate per 1,000 total Births.	
1953	..	3	..	1.2
1954	..	2	..	0.8
1955	..	2	..	0.9
1956	..	2	..	0.8
1957	..	—	..	—
1958	..	—	..	—

All deaths due to pregnancy are specially investigated by the Consultant Obstetrician concerned. The County Medical Officer of Health adds his comments to the report which is then passed to the Regional Assessor who submits his findings to the Principal Medical Officer of the Welsh Board of Health.

Total Deaths

Male	Female	Total
1220	.. 1128	.. 2348

Death Rate per 1,000 of estimated population : 13.87.

The following table gives a comparison of the total number of deaths and death rates during the past five years :—

Year	Urban		Rural		Admin. County		Rate for Eng. & Wales	
	Deaths.	Crude D.R.	Deaths.	Crude D.R.	Deaths.	Crude D.R.		
1954	.. 1101	15.85	.. 1263	12.42	.. 2364	13.82	..	11.3
1955	.. 1104	16.07	.. 1304	12.77	.. 2408	14.10	..	11.7
1956	.. 1084	15.87	.. 1231	12.06	.. 2315	13.58	..	11.7
1957	.. 1066	15.56	.. 1271	12.48	.. 2337	13.72	..	11.5
1958	.. 1078	15.85	.. 1270	12.54	.. 2348	13.87	..	11.7

The following table gives the causes of death in 1958 at specified ages :—

Cause of Death.	All Ages.	Under 1 year.	1 and under 5 years.	5 and under 15 years.	15 and under 45 years.	45 and under 65 years.	65 and over.
All Causes—Males	1220	44	10	8	60	325	773
Females	1128	41	—	2	54	219	812
Total	2348	85	10	10	114	544	1585
1. Tuberculosis, respiratory	18	—	—	—	6	4	8
2. Tuberculosis, other	2	—	—	—	1	—	1
3. Syphilitic Disease	—	—	—	—	—	—	—
4. Diphtheria	—	—	—	—	—	—	—
5. Whooping Cough	—	—	—	—	—	—	—
6. Meningococcal infections	—	—	—	—	—	—	—
7. Acute Poliomyelitis	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—
9. Other infective and parasitic diseases	1	—	—	—	—	1	—
10. Malignant neoplasm, stomach	88	—	—	—	3	23	62
11. Malignant neoplasm, lung, bronchus	48	—	—	—	1	20	27
12. Malignant neoplasm, breast	25	—	—	—	5	8	12
13. Malignant neoplasm, uterus	14	—	—	—	2	8	4
14. Other malignant and lymphatic neoplasms	191	—	—	1	9	67	114
15. Leukaemia, aleukaemia	14	—	1	2	2	1	8
16. Diabetes	11	—	—	—	—	1	10
17. Vascular lesions of nervous system	363	—	—	—	2	66	295
18. Coronary disease, angina	380	—	—	—	5	127	248
19. Hypertension with heart disease	59	—	—	—	—	15	44
20. Other heart disease	320	1	—	—	10	49	260
21. Other circulatory disease	137	—	—	1	1	21	114
22. Influenza	18	1	—	—	3	4	10
23. Pneumonia	66	11	2	—	2	7	44
24. Bronchitis	89	—	—	—	2	25	62
25. Other diseases of respiratory system	75	—	—	—	2	25	48
26. Ulcer of stomach and duodenum	20	—	—	—	2	12	6
27. Gastritis, enteritis and diarrhoea	12	2	—	—	2	—	8
28. Nephritis and nephrosis	22	2	—	—	4	5	11
29. Hyperplasia of prostate	26	—	—	—	—	1	25
30. Pregnancy, childbirth, abortion	1	—	—	—	1	—	—
31. Congenital malformations	24	18	1	—	2	3	—
32. Other defined and ill-defined diseases	233	50	2	4	18	34	125
33. Motor vehicle accidents	14	—	—	1	7	—	6
34. All other accidents	65	—	4	1	17	11	32
35. Suicide	12	—	—	—	5	6	1
36. Homicide and operations of war	—	—	—	—	—	—	—
Total	2348	85	10	10	114	544	1585

Deaths from Infectious Diseases (up to 5 years of age) :

Pneumonia	13
Gastritis, Enteritis and Diarrhoea ..	2
Influenza	1
Measles	—
Whooping Cough	—
Diphtheria	—
Tuberculosis (all forms)	—
Other Infective and Parasitic Diseases ..	—

Cancer

The death rates per 1,000 population for the last five years have been :—

Year	No. of Deaths	Rate
1954 ..	364	2.1
1955 ..	363	2.1
1956 ..	422	2.5
1957 ..	346	2.0
1958 ..	366	2.2

A classification of the causes of death from Cancer during 1958 is as follows :—

Site of Cancer		Age Periods						Total	Grand Total
		0—	1—	5—	15—	45—	65—		
Stomach	M.	—	—	—	1	15	25	41	88
	F.	—	—	—	2	8	37	47	
Lung, Bronchus ..	M.	—	—	—	1	18	24	43	48
	F.	—	—	—	—	2	3	5	
Breast	M.	—	—	—	—	—	—	—	25
	F.	—	—	—	5	8	12	25	
Uterus	M.	—	—	—	—	—	—	—	14
	F.	—	—	—	2	8	4	14	
Others	M.	—	—	—	3	29	63	95	191
	F.	—	—	1	6	38	51	96	
TOTALS	M.	—	—	—	5	62	112	179	366
	F.	—	—	1	15	64	107	187	

The chief causes of death during 1958 and the rates per 1,000 population compared with previous years were :—

Cause of Death	1954		1955		1956		1957		1958	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Heart and other Circulatory Disease ..	839	4.90	871	5.10	807	4.74	899	5.28	896	5.29
Cancer ..	364	2.13	363	2.13	422	2.48	346	2.03	366	2.16
Vascular Lesions of Brain	317	1.85	351	2.06	330	1.94	374	2.20	363	2.14
Tuberculosis (all forms) ..	45	0.26	41	0.24	23	0.13	24	0.14	20	0.12
Pneumonia ..	48	0.28	53	0.31	38	0.22	49	0.29	66	0.39
Bronchitis ..	113	0.66	128	0.75	114	0.67	94	0.55	89	0.53
Other diseases of respiratory system ..	129	0.75	96	0.56	104	0.61	81	0.48	75	0.44
Nephritis ..	33	0.19	32	0.19	31	0.18	18	0.11	22	0.13

Deaths from the above causes for 1958 constitute 80.79% of the total deaths.

The number of deaths of persons 65 years of age and over was 1,585 or 67.50% of the total deaths in 1958.

ADMINISTRATION

The County Health Services (apart from the School Health Service which is outside the scope of this report) are administered by the Health and Public Health Committee. This Committee have appointed seven Sub-Committees to assist in the administration of certain services, viz. :—

- (i) **Ambulance Transport Sub-Committee**, to supervise the administration and organisation of the County Ambulance Service and to make recommendations for the improvement of the Service. The Sub-Committee comprise representatives of the Authority, the West Wales Hospital Management Committee, the Women's Voluntary Services, and the Ambulance employees.
- (ii) **Care and After-Care Sub-Committee**, to exercise the functions relating to the Prevention of Illness, Care and After-Care. The Health and Public Health Committee have power to co-opt on the Sub-Committee persons who are interested in after-care work, provided that not more than one-third of the members of the Sub-Committee are co-opted members. The Sub-Committee have full powers, subject to any directions or restrictions imposed by the Health and Public Health Committee, and in an emergency the Chairman or Vice-Chairman of the Sub-Committee have full power to make temporary arrangements under the Scheme.
- (iii) **Mental Health Sub-Committee**, to undertake the functions for the development of the Mental Health Service. The Health and Public Health Committee have power to co-opt on the Sub-Committee two members of the County Education Committee and other persons who are experienced or interested in Mental Health work, provided that at least two-thirds of the members of the Sub-Committee are members of the Authority.
- (iv) **Three District Nursing Appointments Sub-Committees**, for the Carmarthen, Llanelly and Llandeilo areas, respectively, to make appointments to vacancies for District Nurses under District Nursing Associations. The Sub-Committees have full power, and comprise representatives of the Authority, the County Nursing Association, the District Nursing Association concerned, and the senior member of the County Council representing the area of the District Nursing Association.
- (v) **Home Help Service Sub-Committee**, to consider and make recommendations in unusual and difficult cases requiring Home Help assistance.

There is no divisional health organisation in the County. The County does not lend itself to divisional administration, although the School Health Service is partly decentralised for the area of the Llanelly Educational Divisional Executive.

There are no formal joint "administrative" arrangements with other Local Health Authorities, but arrangements have been made with the Glamorganshire, Pembrokeshire and Cardiganshire Authorities for Ambulance Services along the border areas. Arrangements have also been made with the Glamorganshire Authority for Home Nursing and Midwifery Services in the Cwmllynfell area and with the Pembrokeshire Authority in the Clynderwen area,

JOINT USE OF STAFF

At the end of 1958, there were still nine general medical practitioners employed as part-time Medical Officers of Infant Welfare Centres. Although it is the policy of the Authority, as laid down in the arrangements under Section 22 of the National Health Service Act, 1946, that general practitioners be replaced by Whole-Time Medical Officers of the Authority, other demands on the service of whole-time staff have made it impossible fully to implement the arrangements as yet.

The West Wales Isolation Hospital is under the medical care of the County Medical Officer of Health and his staff as it was prior to 1948.

When required, the Orthopaedic Sisters of the Authority treat Hospital orthopaedic in-patients.

The arrangements of the Authority for a Mental Health Service provide for the joint use of staff with the Regional Hospital Board.

The Consultant Chest Physicians of the Regional Hospital Board undertake for the Authority all possible duties in connection with the prevention and after-care of tuberculosis.

Consultant Orthopaedic Surgeons (Mr. G. Rowley and Mr. R. L. Rees) under the Regional Hospital Board also attend the County Orthopaedic Clinics.

The County Medical Officer of Health attends the meetings of the Hospital Management Committees for Glantawe and Carmarthen Mental Hospital as well as the Carmarthenshire Executive Council.

VOLUNTARY ORGANISATIONS

The oldest voluntary organisations in the County with which the Health Authority are working are the County Nursing Association, the District Nursing Associations, and the Ladies' Committees of Infant Welfare Centres. The Authority owe much to these early pioneers in voluntary social work.

Unfortunately, the tendency for voluntary effort to decline continued during 1958 when a further two District Nursing Associations disbanded. This brings the total number of Associations disbanded since 1948 to twenty-one. This reflects the gradual but sure diminishing of voluntary work since the inception of the National Health Service Act.

Although the voluntary effort of Voluntary Ladies' Committees of some of the Infant Welfare Centres continues to be very active, the general trend shows signs of waning interest. Six Centres do not have a Ladies' Committee.

The voluntary activities of the Women's Voluntary Services, the British Red Cross Society and the Women's Institutes, continue to flourish. The first two organisations are ever ready to assist by arranging escorts for patients without regard to distance or short notice of requirements, and the Women's Institutes are always ready to help by arranging for members to give tuition in hand-work to tuberculous patients. Particular reference must be made to the work of the County Branch of the Women's Voluntary Services in connection with the tremendous amount of work undertaken by them in maintaining the Hospital Car Service. Members of the Women's Voluntary Services, Voluntary Ladies' Committee of Infant Welfare Centres and private individuals give very valuable service by distributing National Welfare Foods.

All these voluntary organisations co-operate from time to time in connection with the Home Help Service, and the Women's Voluntary Services also kindly allow the use of their Llanelly Office as a Home Help Information Bureau two afternoons each week.

Valuable assistance and co-operation is obtained from the St. David's Diocesan Moral Welfare Committee in the care and rehabilitation of unmarried mothers and their children.

A good deal of assistance is also rendered by the Inspectors of the National Society for the Prevention of Cruelty to Children, but their work relating to problem families and neglected children is now undertaken through the Children's Officer.

DOMICILIARY HEALTH SERVICES—ELDERLY SICK AND INFIRM

There is no Geriatrician in the Authority's area but, at the end of the year, preliminary arrangements were in hand for such appointment under the Regional Hospital Board. It is hoped that part of his time will be allocated to the work of the Authority. Without a Geriatrician, it is well nigh impossible to obtain complete co-ordination of all services to the benefit of the chronic sick and aged. The Welfare Services in the County are not controlled by the County Medical Officer of Health which fact does not contribute to an integrated domiciliary service consisting of nursing, welfare and social visits.

During the year, home nurses attended 2,160 patients over 65 years of age (or 42.34% of the total cases attended) and they made 64,738 visits (or 54.14% of the total visits) to these patients.

Once more, the majority of the cases assisted under the Home Help Service were aged—55.69% of the cases being assisted at the end of 1958 were over 70 years of age. As has been stressed so many times before, the assistance granted to these patients has been confined to the essential domestic needs of the home—a limit set by the financial considerations of the Service. It is however, pleasing to report that many home helps voluntarily undertake duties beyond that required of them, and in many cases this includes evening attendance at the homes.

All General Practitioners have been informed of the name and address of the Health Visitors for their area, and they are aware of the availability of Health Visitors for social condition reports.

THE FIRST TEN YEARS OF THE NATIONAL HEALTH SERVICE

We have now ten years experience of the National Health Service—a service subject to tripartite control. This control has been criticised and has been defended during the years. With time, greater co-ordination has been developed between the three Services.

The County Medical Officer of Health has attended meetings of the Glantawe Hospital Management Committee, West Wales Hospital Management Committee, and St. David's Mental Hospital Management Committee; he has also attended meetings of the Executive Council and is a member of the Local Medical Committee. Attendance at these meetings has helped to foster good relationship.

The control of Maternity Services gives rise to concern in view of the division of responsibility for patients and something will have to be

done to save this reduplication of responsibility. Whether as the result of the Cranbrook Report, more uniform control of the ante-natal care of patients will be effected in the second decade of the Health Service remains to be seen.

The relationship between the local authority ante-natal clinics and the general practitioners has, for the most part, been good apart from one or two districts in the County. There are no special comments to be made in respects of the work at these clinics for the past ten years apart from having to report the closure of two clinics due to very poor attendance.

When admission to Hospital for confinement is sought on social grounds, full advantage has not been taken of the Authority's facilities for obtaining reports on home conditions. The County comes within the areas of two Hospital Management Committees and whereas regular requests for reports are received from one of the Committees no such requests are made by the other Committee. This is unfortunate as the information is not only needed when the question of admission arises; it is also of the greatest importance that full information on the home circumstances should be available for consideration when early discharges are contemplated.

The Authority's Infant Welfare Centres continue to work satisfactorily. Seven new Centres were opened in 1948 and a further four Centres have been established up to the end of 1958. Three Centres have been closed during the ten years, one was amalgamated with another Centre without inconvenience to parents or reduction in the total number of annual sessions while the other two Centres were closed because of poor attendances.

The arrangements for the dental treatment of expectant and nursing mothers and young children have not developed to the extent expected. In spite of the advantages of priority and free treatment, the demand has been very small.

The Authority's arrangements under Section 22 of the National Health Service Act included the maintenance of a Hostel for the Care of Unmarried Mothers and their Children. The decreasing use made of the Hostel resulted in its closure in 1956, and unmarried mothers from the County have since been admitted to Hostels outside the County and responsibility for their maintenance has been accepted by the Authority.

The pattern of Home Nursing has changed greatly, due to a large extent, to the general introduction of antibiotic therapy. Home Nurses are now able to nurse at home cases which hitherto were hospital in-patients. In addition, patients can be discharged earlier from hospital. This has resulted in a considerable increase in Home Nursing duties and the work of District Nurse/Midwives is now predominantly general nursing. In 1949, 4,028 cases were attended by District Nurses and 85,045 visits were made. In 1958, 5,101 cases were attended and 119,580 visits made.

There is little change to report in regard to the Authority's midwifery service. The number of home confinements has steadily declined. In 1949, 1,242 home confinements were attended by midwives as compared with 800 in 1958. All District Midwives and District Nurse/Midwives hold Gas and Air Apparatus and in addition, Trichloroethylene Apparatus are now available for all midwives.

It is unfortunate that even after ten years of the National Health Service, apart from the many years of health visiting prior to 1948, the value of the Health Visitor, as envisaged, is not yet fully realised by Hospitals, general practitioners, and the general public. This is indeed unfortunate. Here we have highly trained personnel whose special social training and experience are not used to the desired extent.

The Home Help Service has increased steadily from year to year; the increase in the main has been due to the Aged and Chronic Sick but it is regrettable that the problem of the care of these unfortunate people is far from solved. Home Help assistance with its limited hours is not the answer to this problem. Is it too much to hope that before the end of the second decade of the National Health Service, the satisfactory care of the Aged and Chronic Sick will be an accomplished fact. In 1949, 462 households received assistance, while 716 received assistance during 1958. The most striking increase has been in respect of Aged and Chronic Sick, 60 of whom were receiving assistance in 1949 as compared with 568 in 1958.

The benefits derived from the Home Help Service go beyond the actual housework undertaken. Even so, the limit set by financial consideration has not allowed the Service to develop to the full. Financial limitations have confined the paid assistance to the essential domestic needs of the household. Voluntary work by Home Helps over and above time paid for, is to be applauded.

One of the biggest problems which has arisen during the last ten years and which continues to increase is the problem of nursing staff and a further deterioration in the position must cause curtailment of the domiciliary nursing services. It is, of course, realised that this is a problem which is not confined to this area and which is also not confined to the domiciliary nursing services.

Most of the general medical practitioners in the County co-operate in the arrangements of the Authority for vaccination and immunisation.

47.52% of children under the age of one year were vaccinated against Smallpox during 1958, compared with 16.21% in 1949. The 1958 figure for England and Wales was 44.52% and for Wales alone 32.05%.

Immunisation against diphtheria has not made the same progress. In 1949, 54.12% of children under five years of age had been immunised at some time or other but only 45.71% of this group had been immunised in 1958. The immunisation of school children has also suffered. At the end of 1953, when the figures were first kept, 51.88% of school children had been immunised during the previous five years but the percentage at the end of 1958 was 34.61.

Vaccination against poliomyelitis which was introduced in 1956 has undoubtedly had an adverse effect on the number of requests received for diphtheria immunisation. In 1956, 10,367 children were registered for poliomyelitis vaccination but shortage of supplies of vaccine limited the number of children vaccinated to 1,149. In the two years following, supplies of the vaccine became more plentiful and at the end of 1958, 24,149 children under 16 years of age had been vaccinated; a percentage of 65.76. This result could not have been achieved without the close co-operation of general medical practitioners. The offer of vaccination was extended to expectant mothers and persons up to 25 years of age in 1958 but at the end of the year the response was unsatisfactory.

The BCG vaccination of children of 13 years of age against tuberculosis has also suffered as the result of the heavy demand on the services of Medical Officers for vaccination against poliomyelitis. 633 children were successfully vaccinated in 1956 but none was vaccinated in 1958.

Over 50,000 patients are carried by ambulance transport annually and the total annual mileage by all vehicles amounts to over 500,000. In 1958 28% of all requests received were by general medical practitioners and 68% by the Hospitals. These figures have been fairly static for some years and it is unlikely that any appreciable reduction can take place in the demand under the present organisation where the authorities mainly responsible for ordering transport have no financial obligations to consider.

There are no special comments to make on the arrangements of the Authority for the prevention of illness and the care and after-care of persons suffering from illness.

The Mental Health Service has not progressed as had been envisaged and in particular the community care of the mentally ill is suffering because the Authority have been unable to recruit a Psychiatric Social Worker.

With regard to mental defectives, an Occupation Centre has been established at Llanelly and it is proposed to open additional Centres in due course. Difficulties are still being experienced in obtaining institutional care for mental defectives and some cases have been on the waiting list for admission for a considerable time.

CARE OF MOTHERS AND YOUNG CHILDREN

Expectant and Nursing Mothers

Ante-Natal Clinics—Increased attendances at the Cross Hands Ante-Natal Clinic made it necessary for two additional sessions to be held every month. The first additional session was held on the 1st December. At the end of the year, eight Ante-Natal Clinics were maintained by the Authority and fourteen weekly sessions were being held in the weeks in which the first and second Thursday of the month fell and twelve weekly sessions during other weeks. A list of Clinics with information as to attendances made during the year is as follows :—

Clinic	Sessions weekly	Medical Officer	Attendances		Average total attendance per session
			Ante-Natal	Post-Natal	
Ammanford	.. { Two *	E. E. Williams	.. 898	— 63	11.82 2.42
Llanelly	.. Three	M. G. Danaher	.. 909	23	6.13
Llangennech	.. One	M. G. Danaher	.. 397	10	7.68
Kidwelly	.. One	Davies-Humphreys	.. 521	119	12.80
Burry Port	.. Two	Davies-Humphreys	.. 654	82	7.51
Cross Hands	.. One	M. G. Danaher	.. 566	34	11.32
Pontyates	.. One	E. E. Williams	.. 473	81	10.45
Amman Valley Hospital	.. One	John Davies	.. 2019	—	41.20

* A Special post-natal session is held fortnightly at the Ammanford Clinic.

1,764 cases made 6,849 attendances at the Clinics during the year, viz:—

Ante-Natal	..	1,454 cases, 6,437 attendances.
Post-Natal	..	310 cases, 412 attendances.

Cases for specialist opinion are referred to Clinics at the West Wales General Hospital, Carmarthen, the Llanelly Hospital, and the Amman Valley Hospital, Glanamman.

Blood specimens are taken at all the Authority's Clinics, and the blood groups and Rhesus Agglutinins are made known to midwives and general medical practitioners.

Many general medical practitioners hold their own Ante-Natal Clinics. Midwives do not regularly assist at these Clinics, but some attend sessions at which their patients are being seen by the doctor.

Midwives' Clinics.—Permission to close the Llandeilo Midwives' Clinic was received early in January and no sessions were held during the year. Weekly sessions were held at the Carmarthen Midwives' clinic and 220 attendances were made during the year.

Maternity Outfits.—Maternity Outfits are supplied by the Authority free of charge through the domiciliary midwives to all patients confined at home.

Care of Unmarried Mothers and their Children

Under the Authority's arrangements, unmarried mothers can be admitted to the following Hostels:—

Northlands, Cardiff.
St. Martin's Home, Hereford.
Cwmdonkin Shelter, Swansea.
56, Stanwell Road, Penarth.

Particulars of admissions and discharges during 1958 are given in the following table:—

Hostel.	Admissions.	Discharges.	In Residence on the 31st December.
Northlands, Cardiff	7	4	3
St. Martin's Home, Hereford ..	—	—	—
Cwmdonkin Shelter, Swansea ..	3	4	—
56, Stanwell Road, Penarth ..	2	2	—

The number of unmarried mothers admitted to Hostels still remains low. Out of 70 illegitimate births 12 unmarried mothers only were admitted to Hostels under the Authority's arrangements.

Moral Welfare Workers act as escorts for the unmarried mothers when they are admitted to or discharged from Hostels under the Authority's arrangements.

Close co-operation is maintained with the St. David's Diocesan Moral Welfare Committee in the case of unmarried mothers generally. The Committee assist unmarried mothers in every way possible, and if necessary arrange for the adoption of the infants.

Child Welfare.—The attendance at Gorslas Infant Welfare Centre fell considerably and as there was no justification for a full day clinic, one session was held fortnightly as from the 4th November. 36 Centres were being maintained by the Authority at the end of the year.

A list of the Centres and other information for 1958, is as follows :—

Centre	Where held	Day held	Attend- ances	Avg. attend- ances
Ammanford ..	Child Welfare Clinic, High Street, Ammanford.	Tuesday	2158	41.50
Brynamman ..	Yr Aelwyd, Upper Brynamman	Tuesday	754	32.78
Burry Port ..	Memorial Hall, Burry Port ..	Tuesday	680	26.15
Carmarthen Borough.	The Clinic, Pond Street, Carmarthen.	Monday	1795	36.63
Carmarthen Rural.	The Clinic, Pond Street, Carmarthen.	Wednesday	536	19.85
Cwmamman ..	Bethesda Chapel Vestry, Glanamman.	Wednesday	629	23.30
Felinfoel ..	Yr Aelwyd, Penygaer, Felinfoel	Thursday	1109	42.65
Ferryside ..	Ex-R.A.F. Camp, Ferryside ..	Tuesday	321	12.84
Furnace ..	Saron Vestry, Furnace	Wednesday	189	7.27
Gorslas ..	Public Hall, Cross Hands ..	Tuesday	806	17.15
Kidwelly ..	Trinity Methodist Church, Kidwelly.	Tuesday	701	26.96
Laugharne ..	The Clinic, Laugharne	Tuesday	400	15.38
Llandeilo ..	Church Hall, Llandeilo	Wednesday	424	16.31
Llandovery ..	Reading Room and Institute, Llandovery.	Tuesday	294	11.31
Llandybie ..	Assembly Rooms, Memorial Hall, Llandybie.	Thursday	672	25.85
Llanelly Borough.	Brynmair, Llanelly	Mon. and Fri.	4597	33.55
Llangadog ..	Y.M.C.A. Hall, Llangadog ..	Friday	299	23.00
Llangennech ..	Salem Chapel Vestry, Llangennech	Tuesday	847	32.58
Llanstephan ..	Memorial Hall, Llanstephan ..	Wednesday	320	12.31
Llanybyther	Victory Hall, Llanybyther ..	Monday	299	12.46
Llwynhendy ..	Nazareth Chapel Vestry, Llwynhendy.	Tuesday	1182	45.46

Centre	Where held	Day held	Attend- ances	Avg. attend- ances
Newcastle Emlyn. ..	The Court House, Newcastle Emlyn. ..	Tuesday	428	17.12
Pencader ..	Tabernacle Vestry, Pencader ..	Thursday	345	13.80
Pendine ..	The Institute, Llanmiloe, Pendine. ..	Wednesday	503	19.35
Penygroes ..	Congregational Chapel Vestry, Penygroes. ..	Tuesday	757	29.12
Pontyates ..	Welfare Hall, Pontyates ..	Wednesday	544	20.92
Pontyberem ..	Public Hall, Pontyberem ..	Wednesday	769	29.58
Pumpsaint ..	Coronation Hall, Pumpsaint ..	Thursday	63	7.88
Pwll ..	Salem Chapel Vestry, Pwll ..	Wednesday	301	11.58
St. Clears ..	Old Penuel Vestry, St. Clears ..	Tuesday	443	17.04
Trelech ..	Capel-y-Graig Vestry, Trelech ..	Thursday	57	2.37
Trimsaran ..	Workman's Institute, Trimsaran ..	Tuesday	492	18.92
Tumble ..	Welfare Pavilion, Tumble ..	Tuesday	458	17.62
Velindre ..	Red Dragon Hall, Velindre, Llandyssul. ..	Thursday	474	18.96
Whitland ..	Memorial Hall, Whitland ..	Friday	455	18.20
Ystradowen ..	The County Primary School, Ystradowen. ..	Wednesday	224	10.18

All Centres are held fortnightly except as follows :—

Llanelly—Three sessions weekly.

Carmarthen Borough—One session weekly.

Ammanford—One session weekly.

Llangadog—One session every four weeks.

Pumpsaint—One session every six weeks.

Number of children who attended Centres for the FIRST TIME:—

Under 1 year of age 1745

Between 1 and 5 years of age 57

1802

Number of children under 5 years of age who were attending Centres at the end of the year :—

Under 1 year of age 1564

Over 1 year of age 2026

3590

Number of individual children who attended Centres during the year—3707,

Medical Treatment of Infants

All arrangements for the medical treatment of school children are available for those under school age, but infants are now generally referred by the Medical Officers of Infant Welfare Centres directly to the family doctors for treatment. The following is a summary of the treatment facilities available for infants under the Authority during 1958 :—

Ear, Nose and Throat Defects.—Under arrangements made with the West Wales, Llandovery and Llanelly Hospitals, the County Medical Officer of Health, directed parents to take their children to attend for specialist examination, attendances being made at the Outpatient Departments. Specialist examination at the Amman Valley Hospital was arranged by that Hospital. The names of children found to require in-patient treatment were placed by the specialists on the Hospital waiting lists, and the arrangements for admission were made by the Hospitals.

Eye Defects.—Specialist examinations were carried out at three Centres, viz.:—

- (i) CARMARTHEN.—At the West Wales General Hospital. Arrangements for the attendance of cases were made by the County Medical Officer of Health.
- (ii) LLANELLY.—At Brynmair Clinic. Arrangements for the attendance of cases were made by the Hospital Authorities.
- (iii) GLANAMMAN.—At the Amman Valley Hospital. Arrangements for the attendance of cases were made by the Hospital Authorities.

Plastic Surgery.—The arrangements for the plastic treatment of children at the Churchill Hospital, Oxford, continued. No cases were admitted for operative treatment there during the year but three cases attended for review.

Professor T. Pomfret Kilner, who has been Honorary Consultant Plastic Surgeon since 1937, retired from Hospital duties early in the year. The success of the arrangements in the early years was entirely due to the keen interest shown by Mr. Kilner.

Artificial Light Therapy.—Four children under school age received treatment during the year at the Authority's Clinic at Carmarthen.

Orthopaedic Treatment.—The work of the County Orthopaedic Clinics continued as in past years. The Regional Hospital Board bear the cost of the services of the Consultant Orthopaedic Surgeons : Mr. Gordon Rowley, who paid monthly visits to the County Clinics, and Mr. R. L. Rees, who held a clinic monthly at Carmarthen. Children requiring in-patient treatment are admitted to Gorseinon, Morriston, Swansea and West Wales General Hospitals. Cases requiring X-ray or special examinations attend at the Out-Patient Departments of the Hospitals.

Seventeen Orthopaedic Clinics were functioning in the County on the 31st December, 1958. 2,373 cases were being attended to for all Authorities, viz.:—

County Education Committee	..	..	..	1517
County Health Committee	..	..	..	826
West Wales Hospital Management Committee	..	..	..	12
Glantawe Hospital Management Committee	..	..	..	18

An analysis of the cases of the Health Committee and the Hospital Management Committees according to diagnosis is as follows :—

	Health Committee	Hospital Management Committees	Total
Paralysis :			
Infantile	1	12	13
Spastic	11	3	14
Obstetrical	—	—	—
Other	—	—	—
Congenital Deformities	86	6	92
Infective Conditions of Bones and Joints	—	4	4
Non-infective conditions of Bones and Joints :			
Rickets	—	—	—
Other	—	—	—
Static or Postural Defects	709	1	710
Traumatic Deformities	—	3	3
Multiple Defects	—	—	—
Miscellaneous	19	1	20
Totals	826	30	856

A summary of the work undertaken for these cases under the orthopaedic arrangements is given in the following table :—

	Health Committee	Hospital Management Committees	Total
Number of individual cases under Scheme on 1st January, 1958	788	26	814
Number of new cases during the year ..	353	5	358
Number of individual cases dealt with during the year	1141	31	1172
Number of cases withdrawn from Scheme	315	1	316
Number of cases under the Scheme on the 31st December, 1958	826	30	856
Total number of attendances made at the clinics	3620	86	3706
Number of individual cases received remedial exercises by Sisters	2	1	3
Number of individual cases massaged by Sisters	—	—	—
Number of home visits by Sisters	302	85	387
Number of cases examined by visiting Orthopaedic Surgeons	119	12	131
Number of cases recommended in-patient hospital treatment by Surgeons ..	7	3	10

Ten children under school age were admitted to Hospitals for orthopaedic treatment during the year.

Premature Infants

Premature infants are those notified as having a birth weight of $5\frac{1}{2}$ lbs. or less, irrespective of the period of gestation. Premature Baby Outfits, which include cots complete with bassinette, mattresses, rubber sheeting, blankets, Cestra Premature Baby Outfits, Belcroy Feeders, pipettes, layettes, etc., etc., are available to Midwives during normal office hours at the County Health Department, and at any time of the day or night under arrangements with the West Wales Isolation Hospital.

156 premature infants were notified during 1958 and further information is as follows :—

(a)	Number born at home	..	..	..	37
	(i) Nursed entirely at home	..	..	..	21
	* (ii) Transferred to Hospital	..	..	..	16
	(iii) Died within first twenty-four hours	..	..	..	1
	(iv) Others who died within first twenty-eight days	..	..	..	3
	(v) Survived at end of twenty-eight days	..	..	..	17
(b)	Born in Hospital	..	..	..	119
	(i) Died within first twenty-four hours	..	..	..	8
	(ii) Others who died within first twenty-eight days	..	..	..	19
	(iii) Survived at end of twenty-eight days	..	..	..	92
(c)	Born in Nursing Home	..	..	..	—
	(i) Nursed entirely at Nursing Home	..	..	..	—
	(ii) Died within first twenty-four hours	..	..	..	—
	(iii) Others died within first twenty-eight days	..	..	..	—
	(iv) Survived at end of twenty-eight days	..	..	..	—

* of the 16 transferred to Hospital :—

Died within first twenty-four hours	..	..	—
Others who died within first twenty-eight days	..	..	5
Survived at end of twenty-eight days	..	..	11

It will be seen that in all, 36 premature infants (or 23.08 %) died within the first twenty-eight days. Of that number, death was due to definite pathological condition in respect of 25 infants. Prematurity alone was the cause of death of the other 11 infants. The following table shows the birth weight of the infants who died within the first 28 days:—

Death due to	Birth Weight				Total
	3 lb. 4 ozs. or less	Over 3 lb. 4 ozs. and up to 4 lb. 6 ozs.	Over 4 lb. 6 ozs. and up to 4 lb. 15 ozs.	Over 4 lb. 15 ozs. and up to 5 lb. 8 ozs.	
Pathological condition	*12	4	6	3	25
Prematurity	†9	2	—	—	11

* Two of these infants were 2 lb. or under in weight and six between 2 lb. and 2 lb. 8 ozs.

† Three of these infants were 2 lb. or under in weight and two between 2 lb. and 2 lb. 8 ozs.

Ophthalmia Neonatorum

One case was notified during the year. The notifications for the last five years were as follows :—

Year	Cases		
	Notified	Treated	
		At Home	In Hospital
1954	5	5	—
1955	6	6	—
1956	5	5	—
1957	4	4	—
1958	1	1	—

There was no death from Ophthalmia Neonatorum during this period, and vision was unimpaired in the notified case.

Every case reported to have “discharging eyes” however slight and whether or not notified as ophthalmia neonatorum is kept under special observation until the condition is cleared up. Swabs and smears are taken in each case, and the Laboratory results are made known to the General Practitioner, Midwife and Health Visitor.

Welfare Foods

The arrangements for the distribution of Welfare Foods continued to operate satisfactorily. During the year, one voluntary centre discontinued distribution. At the end of the year, distribution was being undertaken at 50 Centres as follows :—

- 2 Centres staffed by whole-time employees.
- 5 at the offices of Local Sanitary Authorities.
- 20 at Infant Welfare Centres.
- 23 Voluntary Centres.

The Welfare Foods are delivered from the Ministry Depots to a Central Stores in Carmarthen and all the Centres, with the exception of Llanelly, receive their supplies by van from the Central Stores. Llanelly Centre receives deliveries direct from Ministry Depots. Experience has shown that these arrangements work satisfactorily.

Tribute must be paid to the continued co-operation and assistance of voluntary workers in this invaluable, if routine work.

During the period 29th December, 1957—27th December, 1958, Welfare Foods as follows were issued to parents at Centres :—

National Dried Milk	..	72,393 Tins.
Cod Liver Oil	..	10,619 Bottles.
Orange Juice	..	77,091 Bottles.
“ A ” and “ D ” Tablets	..	6,473 Packets.

The figures do not include issues to Hospitals and Institutions from Ministry Depots.

The following table shows the average distribution per week during the four quarters of 1958 :—

Period	29/12/57 to 30/3/58	31/3/58 to 29/6/58	30/6/58 to 28/9/58	29/9/58 to 28/12/58
National Dried Milk (Tins)	1437	1431	1368	1330
Cod Liver Oil (Bottles) ..	228	192	164	231
Orange Juice (Bottles) ..	1435	1635	1554	1304
Vitamin “ A ” and “ D ” Tablets (Packets) ..	118	126	119	133

There was a reduction in the amount of National Welfare Foods distributed as compared with the previous year, in particular in regard to National Dried Milk. The total number of tins of National Dried Milk distributed during 1958 was 72,393 as compared with 82,425 for 1957. The main factors in this connection are (i) that parents show an increasing preference for proprietary baby foods; they have, by doing so, the advantage of still being able to purchase their quota of liquid milk at reduced prices; (ii) the majority of babies born at Hospital appear to be fed on proprietary baby foods; some hospitals favour an expensive brand which means that after discharge from hospital, many parents have to make a special effort to purchase that particular baby food.

At the majority of Infant Welfare Centres in the County, special brand baby foods are also available for sale to parents who have been advised to obtain a particular food for an infant by the Medical Officer in charge of the Centre. This work is also carried out by Voluntary Workers or Health Visitors, except at the Llanelly Infant Welfare Centre where a clerk from the Health Department attends for the purpose. At the Centres where the special brand of foods are not available, the Health Visitors hold vouchers issued by some firms to enable parents to purchase “ clinic packs ” of the food at reduced prices.

Dental Treatment

The demand from expectant and nursing mothers for dental treatment proved to be very slight, only 17 requests being received during the year. 17 of them required treatment and 15 received treatment.

The following is a summary of the work carried out :—

Number of dentures provided	..	..	..	14
Number of teeth extracted	..	..	..	14
Number of fillings	..	..	..	2
Number of scalings and gum treatment	..	..	..	3
Number who received treatment under general anaesthetic	..	..	..	11

Gynaecological Clinic

This Clinic is held at Llanelly twice monthly for married women requiring advice on birth control on medical grounds. Dr. J. Gwendoline Madel, Swansea, is the Medical Officer of the Clinic.

214 cases were seen at the Clinic during 1958 (69 new cases and 145 old cases) and they made 624 attendances.

Family Planning Clinic

A Clinic is held at Carmarthen under the auspices of the Family Planning Association. Advice is given to married women in regard to spacing of children, and also to those unable to have children. The Association have been allowed by the Committee to use the premises and equipment at the Pond Street Clinic, Carmarthen. The Authority also made a monetary grant to the Carmarthen Branch during the year.

Child Life Protection

The duties in connection with Child Life Protection are now undertaken by the Children's Committee. Although Health Visitors do not now act as Visitors for Child Life Protection such children under 5 years of age continue to be supervised by them as part of normal health visiting duties. On attending school, the children come under the supervision of the School Health Service.

Nurseries and Child Minders

No premises or persons are registered in the County under the Nurseries and Child Minders Regulations Act, 1948, and no application for registration was received during the year.

MIDWIFERY SERVICE

The establishment of whole-time County Council Midwives at the end of the year was eight viz.:—

Llanelly Borough	..	..	..	4
Carmarthen Borough	..	..	..	2
Burry Port and Pembrey	..	..	..	2

Llanstephan and Llanfihangel Aberbythich District Nursing Associations disbanded during the year and this resulted in the establishment of District Nurse/Midwives in the direct employ of the Authority being increased to twenty-five while twenty-three District Nurse/Midwives still remained under the control of the District Nursing Associations.

During the year the nursing staff position caused great concern and following a special report by the Chief Nursing Officer, the Authority decided to reduce the number of whole-time Midwives in Llanelly Borough from five to four and to replace the establishment of seven whole-time Relief Midwives by eleven Relief District Nurse/Midwives. The arrangements allowed for Relief posts to be no longer peripatetic. A relief District Nurse/Midwife is required to relieve a group of nurses, and she must reside within the area being relieved by her which enables her to relieve all districts from her own home. Unfortunately, all efforts made to recruit the staff were unavailing and of an establishment of eleven Relief District Nurse/Midwives, two posts only were filled at the end of the year. In addition, there were vacancies for four District Nurse/Midwives. The position is a serious one and were it not for the permanent employment of married nurses, the co-operation of many of the present staff in undertaking duties in two districts for long periods and the assistance by casual relief undertaken by independent nurses, the midwifery and home nursing services may well have broken down during the year.

123 Midwives notified their intention to practise in the County during 1958, viz.:—

			As Midwives	As Maternity Nurses
Domiciliary Midwives	..	..	83	2
Institution Midwives	..	..	38	—

17 of the Domiciliary Midwives were in private practice but apart from two cases, midwifery cases attended by them were those attended while undertaking relief duties for the Authority.

Cases attended by the Midwives in the County during the year were as follows :—

	Domiciliary Cases				Totals	Cases in Institutions
	Doctor not booked		Doctor booked			
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child	Doctor not present at time of delivery of child		
County Council Midwives (including District Nurse/Midwives employed directly by the Authority) ..	7	228	64	290	589	—
District Nurse/Midwives (under Nursing Associations) ..	5	65	24	115	209	—
Midwives employed by Hospital Management Committees ..	—	—	—	—	—	1569
Private Midwives* ..	—	—	2	—	2	—
Totals ..	12	293	90	405	800	1569
* Cases taken while relieving for :						
County Council	1	15	5	41	62	—
Nursing Associations	—	6	1	5	12	—
and included in table above.						

The above table does not, however, give a complete picture of the cases attended by Midwives. 1,468 patients delivered in hospitals were discharged before the fourteenth day (some as early as the second or third day) and the domiciliary midwives were required to nurse these patients until the end of the lying-in period.

The importance of early booking of Midwives by patients has been stressed for many years but Midwives are still called in emergency to cases of which they had no previous knowledge. It is disquieting that after so many years of effort and with so many facilities available free of charge to midwifery patients, we still have the minority who appear indifferent to their own welfare and that of the unborn child.

Hospital Provision for Maternity Cases

All Maternity Hospital accommodation is controlled and administered by the Regional Hospital Board through the Hospital Management Committees. The admission of cases on medical grounds is entirely in the hands of these Committees. The Glantawe Hospital Management Committee also control the admission of cases on social grounds but the County Medical Officer of Health supplies them with information as

to home conditions. The County Medical Officer of Health recommends to the West Wales Hospital Management Committee, cases considered to require Hospital admission on social grounds, but decisions as to admission are in the hands of the Management Committee.

Gas/Air Analgesia

All the Midwives employed under the arrangements of the Authority are qualified to administer gas/air analgesia. All the Midwives have been provided with Minnitt's Gas/Air Apparatus except the whole-time Relief Midwives who use the apparatus of the Midwife relieved by them. Ten private Midwives, who are occasionally employed on relief work, are also qualified to administer gas/air analgesia.

Gas/Air analgesia was administered by Domiciliary Midwives during the year as follows :—

	When Doctor was not present	When Doctor was present	Total
County Council Midwives (including District Nurse/Midwives employed directly by the Authority)	259	42	301
District Nurse Midwives under Nursing Associations	103	16	119
Private Midwives	—	1	1
Totals	362	59	421

Pethidine

Pethidine was also administered by Domiciliary Midwives to a number of cases as will be seen from the following table :—

	When Doctor was not present	When Doctor was present	Total
County Council Midwives (including District Nurse/Midwives employed directly by the Authority)	208	37	245
District Nurse/Midwives under Nursing Associations	55	16	71
Private Midwives	—	2	2
Totals	263	55	318

Trichloroethylene

Ten additional trichloroethylene apparatus were provided during the year making a total of fourteen machines available for the midwives at the end of the year.

Trichloroethylene was administered in domiciliary cases during the year as follows :—

	When Doctor was not present	When Doctor was present	Total
County Council Midwives (including District Nurse/Midwives employed directly by the Authority)	112	10	122
District Nurse/Midwives under Nursing Associations	36	4	40
Totals	148	14	162

Refresher Courses

Provision is made by the Authority for Refresher Courses. Eleven midwives attended courses approved for the purpose of Rule G.1 of the Central Midwives' Board Rules. Two midwives attended a special course of Parentcraft, Group Teaching, and Relaxation.

Pupil Midwives

No arrangements have been made by the Authority for the training of Pupil Midwives.

Puerperal Pyrexia

There were six cases of Puerperal Pyrexia notified during the year; All cases were confined at hospital. One of the cases took her own discharge from hospital on the fifth day; on the eighth day she was notified as a case of puerperal pyrexia with a subsequent diagnosis of pyelitis.

Supervision of Midwives

The non-medical supervision of Midwives is undertaken by the Chief Nursing Officer who is also responsible for the supervision of the work of home nursing and health visiting. A Senior Nursing Officer assists her in midwifery and home nursing duties.

243 visits of supervision were made during the year as follows :—

District Nurse/Midwives	169 visits
County Council Midwives	35 ..
Independent Midwives	18 ..
Hospital Midwives	21 ..

Special visits of investigation were as follows :—

Puerperal Pyrexia	28 visits
Ophthalmia Neonatorum	49 ..
Maternal Deaths	— ..
Others	11 ..

HEALTH VISITING

During the year, the Authority decided to add to the establishment of Health Visitors, the two whole-time School Nurses (one at Llanelly and one at Carmarthen), and also to allocate school nursing duties to the Health Visitor at Carmarthen. This brought the establishment up to 24 whole-time Health Visitor/School Nurses and three District Nurse/Midwife/Health Visitors; the latter undertake duties in three sparsely populated rural areas. It is pleasing to be able to report that at the end of the year, the Health Visiting staff was up to establishment.

Health Visitors, whose duties include the care of mothers and young children, tuberculosis visiting, and the care of the family in general, are, unfortunately, not so well known to the general public as the District Nurse and Midwife. Vagueness about the duties of Health Visitors, however, is not limited to the general public but appreciation of their importance in the social work of a community is now improving. This is undoubtedly linked with the realisation that social medicine has to play an increasingly important part in the National Health Service.

Every effort is made to ensure co-operation between General Practitioners and Health Visitors. All Medical Practitioners have been supplied with lists giving names and addresses of the Health Visitors and particulars of their districts, and instructions have been issued to the Health Visitors regarding co-operation with the Medical Practitioners. Profitable results will come only slowly and will be dependent to a large extent on the initiative and will to help of the individuals concerned.

Home visiting entailing family level education is of prime importance in their work and it is hoped that in time, clinic work will be done by staff other than the Health Visitors.

The number of home visits paid by the Health Visitors in connection with young children for the last five years is as follows :—

Year	Infants under 1 year		Children 1—5 years	Grand Total
	First visits	Total visits		
1954 ..	2191	21120	25551	46671
1955 ..	2080	20394	27385	47779
1956 ..	2199	19547	27980	47527
1957 ..	2276	19262	27130	46392
1958 ..	2310	18135	27086	45221

Home visits in respect of other cases during 1958 were :—

Ante-natal	..	..	..	334
Tuberculosis	..	..	..	2100
Collection of swabs and specimens	..	..	..	210
Miscellaneous	..	..	..	120

In addition to the visits recorded above, 3,176 “no access” visits were made by Health Visitors during the year.

Student Health Visitors

The Authority's success in maintaining full health visiting establishment is to a great extent due to the appointment of student health visitors from time to time. While in training, students receive a grant equivalent to three quarters of the minimum salary scale for Health Visitors. All expenses incurred during training are paid by the Students who are required to give an undertaking to serve the Authority for at least two years after qualification.

Two Student Health Visitors commenced training during the year and a further two were appointed to commence training in 1959.

Refresher Courses

A limited number of Health Visitors are authorised to attend Refresher Courses each year ; three attended during 1958. Two Health Visitors attended an In-Service Staff Training Course arranged by the Central Council for Health Education.

HOME NURSING

Vacancies for District Nurse/Midwives and Relief District Nurse/Midwives increased the burden on the home nursing staff in their efforts to ensure the continuation of a satisfactory service. At the end of the year there were vacancies for four District Nurse/Midwives and nine Relief District Nurse/Midwives.

At the end of the year, nine whole-time District Nurses were employed ; seven of these came under the direct control of the Authority. Of the establishment of 48 District Nurse/Midwives, the number under the direct control of the authority was increased by two to twenty-five because Llanstephan and Llanfihangel Aberbythich District Nursing Associations disbanded during the year. Twenty-three District Nurse/Midwives remained under the control of the District Nursing Associations. I must record appreciation of the co-operation received from the County Nursing Association and the District Nursing Association.

As has already been stated, the pattern of home nursing has greatly changed. Recent years have seen revolutionary changes in the duties undertaken, due, to a great extent, to the introduction of antibiotics. It would not be an exaggeration to refer to the Home Nurse as one of the mainstays of the general nursing care of patients; the duties which she now undertakes relieves pressure on hospital beds and also relieves general practitioners of the essential but onerous task of frequent injection therapy.

In 1949, 4,028 cases received 85,045 visits, while in 1958, 5,101 cases receiving 119,580 visits. A classification of the 1958 cases is as follows :—

	No.	Percentage of Total
Medical	3552	69.63
Surgical	1216	23.84
Infectious Diseases	11	0.22
Tuberculosis	117	2.29
Maternal Complications	47	0.92
Others	158	3.10

1,029 of the cases received more than 24 visits each during the year.

The age distribution of the cases attended during the year was as follows :—

	No.	Percentage of Total
Under 5 years	340	6.67
5 years and up to 65 years	2601	50.99
65 years and over	2160	42.34

Special visits to give injections made up a large proportion of the work of District Nurses, 39.89% of the total visits being for this purpose. This compares with 38.55% for 1957. A further 7.34% (as compared with 7.07% for 1957) of the total visits were made to patients requiring injections and other treatment.

It will be of interest to note that there has been a decided drop in the number of cases of Tuberculosis and other Communicable Diseases attended by Nurses. Further details are given below :—

	No. of Cases	No. of Visits	Average Visits per Case
1956	230	10581	46.00
1957	152	9639	63.41
1958	143	6305	44.09

Decreases were also noticeable in respect of Diabetes Mellitus and other Endocrine Diseases, Ear and Nose Conditions, Diseases of the Respiratory System, Disease of the Digestive System, and Diseases of Skin and Subcutaneous Tissues. The number of injuries attended also fell. Further details are given below :—

Classification	No. of Cases			No. of Visits			Average Visits per Case		
	1956	1957	1958	1956	1957	1958	1956	1957	1958
Diabetes Mellitus and other Endocrine Diseases	125	113	107	13121	10466	10968	10497	92.62	102.50
Ear and Nose Conditions	117	68	71	1067	590	587	9.12	8.68	8.27
Diseases of the Respiratory System	574	543	458	9424	5957	5027	16.42	10.97	10.98
Diseases of the Digestive System	330	299	246	2814	2523	2512	8.53	8.44	10.21
Diseases of Skin and other Subcutaneous Tissues	449	391	313	4908	5242	4618	10.93	13.41	14.75
Injuries	581	586	488	7506	7846	6940	12.92	13.39	14.22

On the other hand, there was an increased number of cases and visits in respect of anaemias viz.:—

		No. of Cases		No. of Visits		Average Visit per Case
1956	..	550	..	14620	..	26.58
1957	..	645	..	19467	..	30.18
1958	..	739	..	19863	..	26.88

Over 500 more social welfare visits were made as compared with 1956.

In the Home Nursing Service, as for the Home Help Service, the continued increase in the number of aged emphasises the present trend and indicates the need for a Geriatrician under whose aegis the care and treatment of the aged could be co-ordinated to the best advantage of patients and services. In 1956, 36.99% of the total cases attended by District Nurses were 65 years of age or over; this increased to 37.77% in 1957 and for 1958 there was a further increase to 42.34%.

No special provision is made for the home nursing of sick children.

Refresher Courses

Provision is made by the Authority for a limited number of District Nurses to attend refresher courses. During the year, four District Nurses attended such courses.

PREVENTION OF BREAK-UP OF FAMILIES

Particular attention is paid by Health Visitors to problem families and regular visits are paid by them. In addition to this, special visits are paid by Senior Nursing Staff as often as it is considered necessary.

In 1950, the Children's Officer was, in this County, designated to co-ordinate all activities for dealing with children neglected or ill-treated in their homes. Bi-monthly meetings are held of a Co-ordinating Committee consisting of the Deputy County Medical Officer of Health, Senior Nursing Officers, Organiser of Home Helps, Boarding-Out Officers, Education Welfare Officers, Probation Officers, representatives of the National Assistance Board, the Local Inspectors of the National Society for the Prevention of Cruelty to Children, and the Children's Officer.

Cases are specially considered at the meetings and decisions are reached as to the best action to be taken. Unnecessary overlapping of visits is prevented in this way.

The Authority have also agreed in principle to the provision of Home Helps in cases where it is considered necessary by the Co-ordinating Committee, but no cases were referred during the year.

VACCINATION AND IMMUNISATION

The arrangements of the Authority for vaccination against smallpox and poliomyelitis and immunisation against diphtheria and whooping cough provide for the work to be undertaken by General Medical Practitioners, Medical Officers of Infant Welfare Centres, and Medical Officers of Health. The majority of General Medical Practitioners co-operate in the arrangements.

Propaganda through personal contact with the parents is undertaken at the Infant Welfare Centres and by the Health Visitors at their home visits.

The heavy demand for vaccination against poliomyelitis had an adverse effect on other immunising procedures. Thus fewer children were immunised against diphtheria—both primary and boosters, and it was not possible to arrange for the BCG vaccination of children of 13 years of age.

Smallpox Vaccination

Records in respect of 1,284 successful vaccinations undertaken during 1958 were received during the year, the ages of the cases being as follows:—

Under 1 year old	1140
Age 1 year	22
Age 2 to 4 years	15
Age 5 to 14 years	11
Age 15 years and over	96
Total	1284

The vaccination of infants under the age of one year is estimated to be equivalent to 47.62% of the registered births for the year. The percentages for the last four years are as follows:—

1955	32.25%
1956	39.79%
1957	43.72%
1958	47.62%

The comparable figures for 1958 for England and Wales, 44.52%, and for Wales only, 32.05%.

Lists of children who have not been vaccinated at the age of about 5 months are received from Health Visitors, and the County Medical Officer of Health sends special letters to the parents.

Diphtheria and Whooping Cough Immunisation

There is no change to report in the arrangements of the Authority for the immunisation of children against diphtheria and whooping cough.

Supplies of diphtheria prophylactic continued to be available free of charge through the Public Health Laboratory Service but it was the responsibility of the Local Health Authority to provide whooping cough prophylactic free of charge for use both at Infant Welfare Centres and by General Medical Practitioners.

Acting on the advice of the Ministry of Health, the issue by the Authority of combined diphtheria/whooping cough prophylactic has been discontinued. It is, however, available through commercial channels

and from the following statistics for 1958 it is evident that the combined prophylactic is still popular :—

Type of Prophylactic used	Age at Immunisation			Total
	Under 1	1—4 years	5—14 years	
Diphtheria only	336	206	4	546
Combined Diphtheria/ Whooping Cough ..	596	210	4	810
Whooping Cough only ..	484	125	3	612

The total number of children immunised during the year against each disease is as follows :—

Disease	Age at Immunisation			Total
	Under 1	1—4 years	5—14 years	
Diphtheria	932	416	8	1356
Whooping Cough ..	1080	335	7	1422

1,348 children under five years of age were immunised against diphtheria during 1958 (12.36%) as compared with 1,243 during 1957 (11%) and 1,831 during 1956 (16.34%).

The above figures cannot, however, be considered to reflect accurately the immunisation state of the population under five years of age. A number of children at school immunisation sessions have stated that they have been immunised as infants although no records exist. It can be assumed that General Medical Practitioners do not forward records in respect of all the children immunised by them. Nevertheless, there is a tendency for parents to defer immunisation until school age.

The arrangements of the Authority provide for “boosting” doses of prophylactic to be given at five yearly intervals. These “boosters” may be given following sessions for medical inspection at schools or, where the numbers are sufficiently large, special sessions are arranged. As a result of the heavy demand of poliomyelitis vaccination on the time of the staff, only 76 children received “booster” injections against diphtheria. This compares with 1,093 “boosters” in 1957 and 1,752 during 1956.

The following table gives the immunisation state of the children in the County at the end of the year :—

No. of Children under 5 years of age	No. Immunised	%	No. of children 5—14 years of age	No. Immunised	%
11200	5048	45.07	24000	19017	79.24

Of the 19,017 immunised children between 5 and 14 years of age, 6,582 (34.61%) were immunised or received “booster” injections in the last five years.

BCG Vaccination

Children of 13 years of age.—The arrangements of the Authority for the BCG vaccination against tuberculosis of children of 13 years of age provide for the work being undertaken by Assistant Medical Officers of the Authority. Because of the heavy demand for vaccination against poliomyelitis on the time of the staff, the BCG vaccination of school children was not undertaken during the year.

Child Contacts of Tuberculosis.—The BCG vaccination of child contacts of tuberculosis patients is the responsibility of the Chest Physicians. 1,875 children were skin tested by them during the year of whom 1,280 (68.27%) proved positive. Of the 595 who proved negative 537 were successfully vaccinated.

Vaccination Against Poliomyelitis

The vaccination of children between the ages of six months and 15 years was continued. Early in the year, the offer was extended to expectant mothers, general medical practitioners and their families and ambulance staff. Towards the end of the year there was a further extension of the arrangements to all persons born since 1933 and hospitals staff and medical students and their families. The following table summarises the vaccination undertaken up to the end of 1958 :—

Group	Year of Vaccination			Totals	
	1956	1957	1958		
Children born in the years 1943 to 1958	1,149	7,653	14,347	23,149	65.76%
Young Persons born in the years 1933 and 1942	—	—	744	744	3% (approx.)
Expectant Mothers	—	—	418	418	16% approx.
General Practitioners and their families	—	—	83	83	—
Ambulance Staff and families ..	—	—	39	39	—
Hospital Staff, Medical Students and families	—	—	11	11	—
Totals	1,149	7,653	15,642	24,444	—

COUNTY AMBULANCE SERVICE

The arrangements of the Authority provide for :—

- (a) A 24 hours service at nine ambulance stations.
- (b) Five “ sitting case ” ambulances, all dual purpose vehicles, stationed at Llanelly, Carmarthen, Ammanford, Llandeilo and Tumble, respectively.
- (c) A Hospital Car Service for the conveyance of “ sitting cases ” arranged by the Women’s Voluntary Services.
- (d) An Ambulance Control Centre under the County Ambulance Officer undertaking the operational control of the Service and co-ordinating all requests for ambulance transport.

The ambulance stations providing a 24 hours service are as follows :—

Station	Number of Ambulances	Whole-time Drivers	Attendants
Llanelly ..	2*	5	Two whole-time and Volunteers
Carmarthen ..	2*	5	Two whole-time and Volunteers
Glanamman ..	1	2	Volunteers
Ammanford ..	1	2	Volunteers
Trimsaran ..	1	2	Volunteers
Tumble ..	2*	3	Volunteers
Llandeilo ..	1	2	Volunteers
Llandovery ..	1	1†	Volunteers
Whitland ..	1	2	Volunteers

* 1 Ambulance only on 24 hours service.

† Garage arrangements.

During the year the establishment of drivers at the Carmarthen and Llanelly Ambulance Stations was increased from four to five per station. This enabled the reorganisation of the shift system to provide for the stations to be manned between midnight and 8 a.m., instead of the stand-by duty previously operative.

The maintenance and repair of Ambulances continued to be undertaken at local garages. Preventive maintenance of the vehicles is carried out in accordance with a comprehensive schedule at intervals of 4,000 miles. Sub-overhauls are undertaken at intervals of 12,000 miles. Complete overhauls, the need for which is based on the performance of the vehicles, are undertaken as required.

Two diesel powered ambulances were obtained during the year for replacement purposes. It is of interest to note that the fuel consumption of diesel vehicles was 25.23 miles per gallon as compared with 13.76 miles per gallon for petrol driven vehicles.

There was a slight increase in the demand for transport during the year, the average number of patients conveyed per month being 4,754 as compared with 4,420 during 1957 (a increase of 7.56%).

The total mileage for all vehicles also increased, being 553,561 miles as compared with 523,523 miles in 1957 (an increase of 5.74%).

A comparison of the mileages for each quarter of the last five years is given in the following table :—

	1954	1955	1956	1957	1958
March Quarter ..	141,310	126,594	133,422	137,151	137,074
June Quarter ..	132,706	137,612	138,555	136,614	140,439
September Quarter ..	135,031	132,340	129,186	128,200	139,718
December Quarter ..	136,598	132,359	133,297	121,558	136,330
Totals ..	545,645	528,905	534,460	523,523	553,561

The average number of trips per month for 1958 was 1,256 as compared with 1,170 for 1957, an increase of 7.35%.

National Health Service (Amendment) Act, 1957

This act empowers Local Health Authorities to provide ambulances on a repayment basis, in circumstances in which there is no duty under the arrangements made for the provision of an ambulance service in accordance with the National Health Service Act, 1946. These are permissive powers and the Act does not alter in any way the duty of the Authority under the Act of 1946. The standard of that service should not be impaired and no part of the cost of arrangements under the 1957 Act should fall on the rates and the exchequer.

The Authority have agreed to provide, on request, a reserve ambulance (if available) to standby at sports or other public meetings, provided :

- (i) that an ambulance service driver who was off duty was prepared voluntarily to act as driver of the vehicle for the period required;
- (ii) that the organisers of the meeting remunerated the driver for his services in addition to the charge made by the Authority for the use of the ambulance;
- (iii) that the County Ambulance Officer had the right to withdraw the vehicle at any time at short notice.

No requests were received during the year for an ambulance on a repayment basis.

In the case of individual patients requiring ambulance transport on repayment, the County Medical Officer of Health is authorised to provide the service only where he considers the medical grounds were sufficiently strong. Four cases were conveyed during the year.

MILEAGE

PATIENTS

TRIPS

Month	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total	Ambulances	Hospital Car Service	C.C. "Sitting Case" Vehicles	Hired Cars	Total
January ..	787	277	274	51	1389	2789	873	1394	160	5216	25269	14684	7453	3009	50415					
February ..	601	277	224	45	1147	2175	874	1327	186	4562	19419	14577	7100	2815	43911					
March ..	582	302	231	51	1166	1773	1081	1208	211	4273	17072	16631	5772	3273	42748					
April ..	595	294	224	43	1156	1875	1143	1151	156	4325	17596	15720	5238	2528	41082					
May ..	721	394	337	53	1505	2382	1594	1675	170	5821	21577	21301	7440	3371	53689					
June ..	634	327	206	53	1220	2364	1295	1180	171	5010	18699	17933	5560	3476	45668					
July ..	602	319	187	61	1169	2086	1146	1071	241	4544	18442	17211	5352	3421	44426					
August ..	789	372	196	50	1407	2496	1209	1028	171	4904	21740	20502	6747	3135	52124					
September ..	621	335	191	56	1203	1994	1103	1046	142	4285	18101	17065	4896	3106	43168					
October ..	803	369	248	51	1471	2885	1267	1254	194	5600	22971	18711	7131	3259	52072					
November ..	683	281	144	52	1160	2693	981	917	101	4692	21119	15853	5459	3267	45698					
December ..	611	300	121	43	1075	1798	1085	365	66	3814	17292	14065	5034	2169	38560					
Total ..	8029	3847	2583	609	15068	27310	13651	14116	1969	57046	239297	204253	73182	36829	553561					
Average per month for 1958 ..	669	321	215	51	1256	2276	1138	1176	164	4754	19941	17021	6099	3069	46130					
Average per month for 1957 ..	654	247	208	60	1170	2410	720	1160	129	4420	20320	12971	6277	4057	43626					

The following table shows the origin of requests received for ambulance transport during the year :—

Origin	Stretcher Cases		Sitting Cases		Total	
	No. of calls	% of total calls received	No. of calls	% of total calls received	No. of calls	%
Medical Practitioners ..	2787	7.76	7255	20.19	10042	27.95
Hospitals	2144	5.97	22122	61.57	24266	67.54
Nurse/Midwives ..	196	0.55	256	0.71	452	1.26
Clinics	33	0.09	277	0.77	310	0.86
Police	105	0.29	16	0.04	121	0.34
Welfare and Authorised Officers	36	0.10	35	0.10	71	0.20
Ministry of Pensions, etc.	308	0.86	358	1.00	666	1.86
Totals ..	5609	15.61	30319	84.39	35928	100.

Of the 30,319 requests for the conveyance of “sitting” patients 13,429 were conveyed by ambulances.

The proportion of calls received from the various sources are roughly equivalent to that for previous years, and indicate a continued heavy demand from hospitals. There is room for assessing more realistically the needs of out-patients attending hospital clinics.

Radio Control of Ambulances

The radio control of ambulances continued to function satisfactorily and enabled the service to deal more expeditiously with emergency cases and ensured a more efficient use of the ambulances.

The following is a comparison of miles per patient conveyed by ambulance for the last five years :—

Year				Miles per patient
1954	..	..	..	8.43
1955	..	..	..	9.05
1956	..	..	..	8.53
1957	..	..	..	8.43
1958	..	..	..	8.76

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The arrangements for this Service in the County cover :—

- (a) Tuberculous patients and their families.
- (b) Patients suffering from malignant disease, and their families.
- (c) The provision of sick room and nursing requisites required by patients being nursed at home.

The Health and Public Health Committee have appointed a Care and After-Care Sub-Committee to exercise the functions of the Authority under the arrangements.

Home Nursing and Home Helps are provided when necessary under the County arrangements for those services. Care and after-care of patients suffering from mental illness or mental defect forms part of the Authority's arrangements for a Mental Health Service.

Tuberculosis

The work of the Authority is directed to the physical and social well-being of the tuberculous patient and the welfare of his family. In practice, it has been found that the needs of patients and their families are confined to the following :—

- (a) The loan of beds and bedding where necessary to enable a patient to be segregated. Issues were made to one patient during the year, and eight sets were on loan at the end of the year.
- (b) The loan of sleeping-out shelters in those cases where adequate segregation cannot otherwise be arranged. Three shelters were being used by patients at the end of 1958.
- (c) Assistance to obtain suitable housing accommodation in co-operation with Local Housing Authorities.
- (d) Home Help Assistance. 22 households with tuberculous patients were assisted during the year.
- (e) Nursing requisites.
- (f) Assistance towards the cost of travelling expenses of relatives to visit patients in Hospitals and Sanatoria. 20 applications from relatives of tuberculous patients were granted during the year.
- (g) BCG vaccination of child contacts. Details will be found in the section devoted to Vaccination and Immunisation.
- (h) Occupational Therapy. This aspect of the service has been started only in a very small way in the County. It is an important factor in the care and treatment of patients, and requires expansion.

Co-ordination of the care and after-care work, and the diagnostic and treatment services for the tuberculous patient, is achieved by personal contact between the officers of the Authority and the Chest Physicians and by interchange of reports and recommendations.

Malignant Disease

The Care and After-Care Service of the Authority for tuberculosis applies where appropriate to cases of malignant disease, but the demand for such assistance has been almost entirely for sick-room requisites and Home Help. The only other assistance granted has been the provision of bedding in necessitous cases, but no application for bedding was received during 1958.

Travelling Expenses of Relatives

Assistance is granted by the Authority in necessitous cases towards the cost of the travelling expenses of relatives visiting long-stay patients in Hospitals and Sanatoria. 20 applications from relatives of tuberculous patients and 16 from relatives of other cases were granted during the year.

Assistance is granted for visits to Hospitals and Sanatoria which are not less than 40 miles from the residence of the applicant, and is subject to the following conditions :—

- (a) That there is urgent reason for the visit because of the patient's serious condition, or that the visit would in medical opinion do the patient good and aid response to treatment.
- (b) That because of the length of the journey the relatives concerned are unable to afford it from their own resources without substantial hardship.
- (c) That subject to (a) above, the assistance is restricted to one relative every month or two relatives every two months, unless a senior member of the Medical Staff of the Hospital certifies that more frequent visits are essential on account of the patient's serious condition.

Venereal Disease

The Deputy Superintendent Health Visitor made 11 home visits in connection with the following up of cases suffering from Venereal Diseases.

HOME HELP SERVICE

Home Help assistance continued to be provided on the same lines as for last year; assistance being limited to the amount needed for the essential duties of the household. The problem of the other needs of patients—particularly the aged and chronic sick, still remains unsolved. The welfare of these unfortunate people is outside the scope of the Home Help Service but here we have untold opportunities for voluntary effort. There is no better field for the efforts of voluntary bodies than that connected with the welfare of the aged and chronic sick. How to stimulate voluntary bodies or individuals to take action to fill the existing gaps in the arrangements for the welfare of the aged and chronic sick is a matter which should be given every consideration. All possible means should be used to give greater publicity to this problem at both national and local level.

It is pleasing to be able to report once more that some Home Helps continue to assist these old people voluntarily over and above their official duties. This, however, caters for a small proportion of the patients only.

The extent to which assistance was necessarily limited will be seen from the following table showing the authorised assistance during the last normal week of 1958 :—

Weekly Assistance	No. of Cases
6 hours and under	81
Over 6 hours and up to 9 hours ..	114
Over 9 hours and up to 12 hours ..	170
Over 12 hours and up to 15 hours ..	22
Over 15 hours and up to 18 hours ..	16
Over 18 hours	*1

* Maternity Cases.

Some cases were taken over by the National Assistance Board during the year but it was also found necessary for the Authority to take some cases over from the Board. The main reason for this was that it was claimed that the patient was unable to find anyone to assist and as the Board's Officers are not required to find domestic helps for the patients, there seems to be no option but to arrange for assistance to be provided under the Authority's arrangements.

716 cases received Home Help assistance during 1958, as compared with 670 cases during 1957. The 716 cases include 12 patients for whom a second period of assistance was provided during the year and one patient who received three periods of assistance. The number of individual families who received assistance during 1958 was therefore, 702.

The 716 cases for 1958 were :—

Maternity Cases	86
Tuberculosis Cases	22
Chronic Sick	568
Others	40
Total	716

There was an increase in the number of cases assisted during the year. The upward trend in the number of chronic sick being assisted continued during 1958, 568 cases received assistance as compared with 523 in 1957. The ever increasing problem of the aged chronic sick at home can only be solved by a more enlightened basic approach.

404 cases were being assisted on the 31st December, 1958, and at least 361 of them (89.36%) were "long term" cases, i.e., those who had been receiving assistance for more than three months. An analysis of the periods of assistance is given in the following table :—

Period of Assistance	No. of Cases
Less than one month	12
One to two months	18
Two months to three months ..	13
Three months to four months ..	21
Four months to five months ..	7
Five months to six months ..	14
Six months to twelve months ..	63
Over twelve months	256
Total	404

The age distribution of the 404 cases was as follows :—

	No. of Cases
30 years of age and under	6
Over 30 years of age and up to 40 ..	24
Over 40 years of age and up to 50 ..	22
Over 50 years of age and up to 60 ..	42
Over 60 years of age and up to 70 ..	85
Over 70 years of age and up to 75 ..	77
Over 75 years of age and up to 80 ..	83
Over 80 years of age and up to 85 ..	46
Over 85 years of age and up to 90 ..	17
Over 90 years of age	2
Total	404

225 of the cases (or 55.69 %) were over 70 years of age, and 310 of the cases (or 76.73 %) were over 60 years of age.

These figures again show that the care of the aged remains a solid problem and needs to be dealt with sympathetically in order that as much help and consideration as possible may be granted to them to brighten their closing years.

On the 1st January, 1958, 286 Home Helps were available for duty. 140 new Home Helps were enrolled during the year and 99 resigned. On the 31st December, 327 were available for duty. Service given in the last normal week of the year was equivalent in terms of whole-time employment to 91 Home Helps.

No arrangements were made for training Home Helps during the year.

HEALTH EDUCATION

Health Education is undertaken through personal contact with parents and others, by Medical Officers, Health Visitors, District Nurses and Midwives. As an aid to the staff in this work, pamphlets on relevant topics, including the prevention of accidents in the home, are distributed from time to time.

Particulars are now being supplied by Hospital Management Committees to the County Medical Officer of Health of home accident cases treated at Hospitals. Health Visitors and District Nurses are informed of the cases residing in their areas and advised to use the circumstances of particular accidents to supplement their general health education work.

MENTAL HEALTH SERVICE

The arrangements of the Authority provide for :—

(a) the employment of :—

- (i) A Medical Officer to assist the County Medical Officer of Health in the development of the Service and its medical supervision.
- (ii) A Psychiatric Social Worker to assist the Medical Officer in the community care of the mentally ill and mental defectives.
- (iii) One Social Welfare Officer for the community care of the mentally ill and mentally defective.
- (iv) Six Duly Authorised Officers who combine their duties of taking initial proceedings under the Lunacy and Mental Treatment Acts with their duties as Welfare Officers under the County Welfare Committee.

(b) The establishment and staffing of Occupation Centres.

It has unfortunately been impossible to implement the provision for the employment of a Psychiatric Social Worker.

Lunacy Acts

During the year, the Duly Authorised Officers arranged for the certification of 21 patients who were admitted to Mental Hospitals under the provisions of the Lunacy Acts. Records have also been received of the following admissions :—

Section 20 of the Lunacy Act, 1890 (Three day Order)	..	..	..	..	51
Section 21 (1) of the Lunacy Act, 1890 (Justice's Order authorising the detention of patients for 14 days without certification)	..	..	..	..	19
Voluntary Patients	..	..	..	..	312
Temporary Patients	..	..	..	..	2

At the end of the year, the Social Welfare Officer had 9 psychotics under supervision following discharge from Mental Hospitals.

Mental Deficiency Acts

24 defectives (12 males and 12 females) were brought to the notice of the Health Authority during the year; 11 of them (6 boys and 5 girls) were reported by the Education Committee. These 24 cases were dealt with as follows :—

	M.	F.	Total
Admitted to Hospitals	3	1	4
Placed on Waiting List for admission to suitable Hospitals*	1	3	4
Placed under guardianship	—	—	—
Placed under Statutory Supervision	7	7	14
Placed under Voluntary Supervision	—	—	—
Action Unnecessary	—	—	—
Action pending	—	1	1
Found not to be Defective	1	—	1
Totals	12	12	24

*These cases were under Statutory Supervision pending admission.

Of the cases reported during previous years, 11 (6 males and 5 females) were admitted to Institutions during the year.

Two cases ceased to be under care during the year, viz.:—

	M.	F.	Total
Removed from the Register as "not subject to be dealt with"	—	1	1
Deceased	—	—	—
Left Area	1	—	1
Discharged by Order of the Board of Control	—	—	—
Totals	1	1	2

At the end of 1958, the Authority held records of 207 defectives as follows :—

	M.	F.	Total
At Hospitals	39	60	99
Under Guardianship	2	—	2
Awaiting Admission to Hospitals*	5	7	12
Under Statutory Supervision	32	33	65
In a " place of safety "	—	—	—
Under Voluntary Supervision	26	23	49
Totals	104	123	227

*These Cases were also under Statutory Supervision pending admission.

Cases on Licence

Of the 99 cases at Institutions, two females were out on licence at the end of the year.

Occupational Training of Mental Defectives

The Occupation Centre at Llanelly is now in its third year and the progress made by those who have been pupils since it was opened is sufficient evidence that its establishment was justified. Many of the pupils travel long distances daily and their attendance record is good.

Eight pupils were admitted during the year. There is still a short list of cases awaiting admission as it has been found impracticable to admit more than one or two at a time as they require considerable individual attention to accustom them to the routine of the Centre and often to train them in clean habits.

At the end of the year, there were 36 pupils on the register (17 males and 19 females). Their ages were as follows :—

	Under 5 years	5—16 years	16—20 years	Over 20 years	Total
Males	—	9	1	7	17
Females	—	10	2	7	19
Total	—	19	3	14	36

In view of the increase in the number on the register, a number of whom were of low grade, an additional female assistant supervisor was appointed in a temporary capacity in July and this appointment made it possible to improve the organisation of the Centre by forming four " classes " instead of three. The new class established was the Occupational Group, comprising the lower grade pupils who have very little

aptitude or specific ability but can be occupied with the simplest occupational therapy.

The other three groups (1) younger children; (2) older boys and (3) older girls, progressed much better following the re-organisation and the low grade pupils also benefited from the extra occupation and supervision.

In the younger group there is evident an increasing tendency to group work and play, a willingness to share and patience in waiting for their "turn." These are important traits and though slow in developing, they do show a measure of success which is achieved.

Handwork of a very good standard was produced by the older groups and an Open Day held at the end of the year was well attended. The interest shown by the visitors in the articles displayed was most gratifying. Most of the articles for sale were purchased by visitors.

Cookery was introduced into the syllabus for the older girls during the year and it has proved very popular. It is evident that what they learn at the Centre is exercised at home and the co-operation of the parents is much appreciated.

Overall, the Centre is a happy one. The atmosphere is one of contented, purposeful activity and each day a little progress is being made.

Home Teaching

Eleven defectives who cannot attend the Centre are still being visited periodically in their homes for tuition. They are also making good progress with handwork.

COMMUNICABLE DISEASES

The following table summarises the notifications of infectious diseases received during 1958 :—

Disease				No. of cases notified
Scarlet Fever	..	..	..	41
Whooping Cough	..	..	..	42
Diphtheria ..	..	..	..	—
Measles ..	..	..	..	1731
Pneumonia ..	..	..	..	114
Meningococcal Infection	..	..	..	2
Acute Poliomyelitis :				
Paralytic ..	..	..	..	—
Non-Paralytic ..	..	..	..	—
Acute Encephalitis :				
Infective ..	..	..	..	—
Post-infectious ..	..	..	..	—
Dysentery ..	..	..	..	19
Ophthalmia Neonatorum	..	..	..	1
Puerperal Pyrexia ..	..	..	..	6
Typhoid Fever ..	..	..	..	1
Para-typhoid ..	..	..	..	—
Food Poisoning ..	..	..	..	4
Erysipelas ..	..	..	..	6

It will be noted that for the eleventh year in succession, no case of diphtheria was notified.

Acute Poliomyelitis

No cases of acute poliomyelitis were confirmed in the County during the year.

In 1957, there were four cases (two adults and two children), three of which were paralytic.

LABORATORY SERVICES

The Public Health Laboratory at Carmarthen, which is controlled by the Medical Research Council, is available for the examination of bacteriological specimens in connection with the County Health Services. The services rendered by the Laboratory are particularly valuable in the control of epidemics, and full co-operation is maintained between the staff of the Laboratory and the Health Department. 19,239 specimens were examined at the Laboratory during 1958.

VENEREAL DISEASES

Carmarthenshire cases are treated at the Venereal Diseases Clinics at Mount Pleasant Hospital, Swansea, and Bryntirion Hospital, Llanelly. 74 new patients from the County attended during the year as follows :—

	Syphilis	Gonorrhoea	Non-V.D. and other conditions	Total
Swansea Clinic	—	9	45	54
Llanelly Clinic	2	4	19	25
Total	2	13	64	79

Total attendances of patients during the year :—

Swansea Clinic	438
Llanelly Clinic	584
Total	1022

The following table gives the number of cases dealt with for the first time during each of the last five years :—

Year	Acquired and Congenital Syphilis			Gonorrhoea			Other conditions
	M.	F.	T.	M.	F.	T.	T.
1954 ..	6	2	8	21	1	22	73
1955 ..	—	3	3	12	2	14	77
1956 ..	4	2	6	17	3	20	85
1957 ..	3	7	10	4	—	4	77
1958 ..	1	1	2	12	1	13	64

The following table summarises the work of the Clinics during 1958 :—

New and Old Cases	Swansea Clinic		Llanelly Clinic		Total Male	Total Female	Total
	M.	F.	M.	F.			
(1) Cases under treatment or observation on January 1st	17	5	11	10	28	15	43
(2) Returned defaulters ..	3	—	—	1	3	1	4
(3) Dealt with for the first time and suffering from :—							
(a) Syphilis :							
Primary	—	—	—	1	—	1	1
Secondary	—	—	—	—	—	—	—
Latent first year ..	—	—	—	—	—	—	—
Later stages ..	—	—	1	—	1	—	1
Congenital ..	—	—	—	—	—	—	—
Others	—	—	—	—	—	—	—
(b) Gonorrhoea ..	15	1	4	—	19	1	20
(c) Other conditions or Undiagnosed ..	43	2	15	4	58	6	64
Totals ..	78	8	31	16	109	24	133
Attendances as Out-Patients:—							
(a) Seen by Medical Officer	231	31	199	100	430	131	561
(b) For intermediate treatment	170	6	201	84	371	90	461
Total attendances ..	401	37	400	184	801	221	1022

The following table shows the results of treatment in 1958 :—

	Swansea Clinic			Llanelli Clinic		
	Syphilis	Gonor- rhea	Other con- ditions	Syphilis	Gonor- rhea	Other con- ditions
Cases under treatment, etc., on January 1st ..	7	—	15	15	2	4
Cases dealt with for first time, including new cases, returned defaulters and transfers in	3	16	45	3	4	19
Totals ..	10	16	60	18	6	23
Discharged cured after completion of treatment	2	9	32	3	5	21
Ceased to attend before completion of treatment and/or observation ..	—	1	—	—	—	—
Cases under treatment or observation that died from the disease ..	—	—	—	—	—	—
Transferred out to other Centres, Institutions, etc.	—	—	2	1	—	—
Cases remaining under treatment, etc., on 31st December	8	6	26	14	1	2
Totals ..	10	16	60	18	6	23

TUBERCULOSIS

Two Chest Physicians each with an Assistant Chest Physician cover the County. The Physicians of Pembrokeshire and Swansea also attend Carmarthenshire cases along the borders of the County.

The number of new cases reported by formal notification or otherwise and the case rates per 1,000 population during the past five years are as follows :—

Year	No. of Respiratory cases			Case rate	No. of Non-Respiratory cases			Case rate
1954	..	197	..	1.15	..	43	..	.25
1955	..	192	..	1.12	..	40	..	.23
1956	..	223	..	1.31	..	29	..	.17
1957	..	157	..	0.92	..	20	..	.12
1958	..	144	..	0.85	..	27	..	.16

The mortality figures for the same five years are as follows :—

Year	Deaths from Respiratory T.B.			Death Rate per 1,000 population		Deaths from Non-Respiratory T.B.			Death Rate per 1,000 population	
1954	..	39	..	.23	..	6	..	.04		
1955	..	38	..	.22	..	3	..	.02		
1956	..	23	..	.13	..	—	..	—		
1957	..	18	..	.11	..	6	..	.04		
1958	..	18	..	.11	..	2	..	.01		

The following table shows the age distribution of all new cases notified during 1958 :—

Age Periods		Respiratory		Non-Respiratory		Total
		M.	F.	M.	F.	
0—1	..	—	—	—	—	—
1—5	..	2	—	1	—	3
5—15	..	—	6	—	2	8
15—25	..	10	16	1	4	31
25—35	..	11	14	4	—	29
35—45	..	11	8	2	4	25
45—55	..	20	4	2	2	28
55—65	..	19	5	1	3	28
65+	..	14	4	—	1	19
Total	..	87	57	11	16	
Grand Total		144		27		171

The following table shows the deaths from Tuberculosis classified into the various age groups for the year 1958 :—

Age Periods	Deaths from Tuberculosis			
	Respiratory		Non-Respiratory	
	M.	F.	M.	F.
0—1 ..	—	—	—	—
1—5 ..	—	—	—	—
5—15 ..	—	—	—	—
15—45 ..	3	3	1	—
45—65 ..	4	—	—	—
65+ ..	6	2	1	—
Totals ..	13	5	2	—
Grand Totals ..	18		2	

Examinations at Chest Clinics

During the year, 4,494 new cases, including 2,030 contacts, were examined. Of these 127 were diagnosed as definitely tuberculous and 3,982 as non-tuberculous. 385 cases were not finally diagnosed.

Register of Cases

The following table summarises for the year the Register of Tuberculosis cases in the County :—

	Resp.		Non-Resp.		Totals		Grand Total	Rate per 1,000 population
	M.	F.	M.	F.	M.	F.		
Cases on Register 1/1/58	721	609	106	122	827	731	1558	9.20
New Cases, 1958	87	57	11	16	98	73	171	1.01
Withdrawn:—								
Recovered ..	45	52	12	15	57	67	124	—
Left Area ..	22	20	2	—	24	20	44	—
Change of Diagnosis ..	7	4	—	3	7	7	14	—
Deaths:—								
Tuberculosis ..	13	5	2	—	15	5	20	—
Other causes ..	11	1	—	—	11	1	12	—
On Register, 1/1/59 ..	710	584	101	120	811	704	1515	8.95

COUNTY WELFARE SERVICES

Under the National Assistance Act, 1948, the County Council were given power to make arrangements for promoting the welfare (but excluding financial assistance or medical treatment) of persons who are blind, deaf or dumb, aged, and other who are substantially and permanently handicapped. The County Welfare Committee was appointed to undertake the Council's functions under the Act.

Blind Persons

There is no change to report in the arrangements for the care and welfare of blind persons, and the Carmarthenshire Blind Society continued to act as agents of the County Council. Medical examination and certification of cases is arranged by the County Medical Officer of Health, and specialist examination, when necessary, is undertaken at the Ophthalmic Clinics of the Regional Hospital Board at Carmarthen and Llanelly. If a patient is unable to travel, a domiciliary visit is made by the Ophthalmologist.

During 1958, 72 new cases (31 males and 41 females) were examined and 47 (18 male and 29 female) were certified as blind, and 12 (6 males and 6 females) were found to be partially blind. The total number of blind persons on the Register at the end of the year was 573 (as compared with 591 on the 31st December, 1957). The age distribution of these cases was as follows :—

Age	M.	F.	Total	Age	M.	F.	Total
0—5 ..	1	—	1	50—60 ..	23	27	50
5—15 ..	3	2	5	60—70 ..	35	86	121
15—30 ..	13	5	18	Over 70 ..	115	214	329
30—50 ..	28	21	49	Totals ..	218	355	573

238 (79 male and 159 female) became blind when over 65 years of age. 24 (9 male and 15 female) became blind in infancy (under 12 months old).

At the end of the year two males were under training at the Cardiff Institute for the Blind. One male was under training as a Mattress Maker at Swansea. One male was studying Social Science at University College, Cardiff. One female was under training as a Domestic Assistant at Swansea. Fourteen males were employed at home. Five males and one female were employed in workshops (two males at Swansea, three males and one female at Llanelly).

Follow-up of Registered Blind and Partially Sighted Persons

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(i) Number of cases registered during the year in respect of which Section F. 1 of Form B.D.8 recommends :— ..				
(a) No treatment	15	3	—	20
(b) Treatment (medical surgical or optical) ..	12	5	—	4
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment	11	5	—	4

Ophthalmia Neonatorum :

- (i) Total number of cases notified during the year—1.
(ii) Number of cases in which :—
- | | | |
|--|---|-----|
| (a) Vision lost | } | Nil |
| (b) Vision impaired | | |
| (c) Treatment continued at end of year | | |

Epileptics and Spastics

There are no arrangements catering for the special welfare needs of adults suffering from Epilepsy or Cerebral Palsy. The County Welfare Committee, however, bear the maintenance fees in respect of six epileptics at Homes for Epileptics, and one old poliomyelitis case at a Home for Cripples.

MILK CONTROL

The number of animals slaughtered under the Tuberculosis Order, 1925, during the past five years is as follows :—

1954	..	..	..	1
1955	..	..	..	Nil
1956	..	..	..	Nil
1957	..	..	..	Nil
1958	..	..	..	Nil

The enforcement of regulations relating to Raw Milk is the responsibility of the Ministry of Agriculture and Fisheries [Milk (Special Designations) (Raw Milk) Regulations, 1949].

Under the Milk and Dairies Regulations, 1949, responsibility for the registration of dairy farms and of persons carrying on the trade of dairy farmer falls on the Ministry of Agriculture, Fisheries and Food. Local Authorities retain responsibility for dairies which are not dairy farms and of dairymen who are not dairy farmers, and for the enforcement of the regulations relating to diseases communicable to man.

FOOD AND DRUGS

The duty of the County Council under the Food and Drugs Act, 1955, to ensure that food sold for human consumption is of good quality and wholesome is an important part of the comprehensive public services which are essential to good health. The following is the report of the Chief Inspector of Food and Drugs for the year :—

REPORT OF CHIEF INSPECTOR

During the year, 1,776 samples of various articles of food and drugs were procured for analysis for compositional quality and purity. Of these, 1,000 samples were submitted to the Public Analyst, whereas the remainder, comprising 738 informal samples of milk and 38 informal samples of alcoholic spirits, were tested by the sampling officers.

Summary of the Samples Procured

Samples of MILK submitted to the Public Analyst.

Total number	..	..	..	..	..	684
Reported genuine	..	..	..	..	..	568
Deficient in Non-Fatty Solids but otherwise genuine	..	..	..	..	..	48
Containing Added Water	..	..	..	..	..	19
Deficient in Fat	..	..	..	..	..	23
Deficient in both Fat and Non-Fatty Solids	..	..	..	..	..	26

Included in the above total are 30 "appeal to cow" samples of milk, 19 of which were genuine whereas the other 11 were deficient in fat and/or non-fatty solids.

Particulars of legal proceedings taken under Section 2 of the Food and Drugs Act, 1955, in respect of samples of milk certified to contain Added Water.

Trade of Supplier	Percentage Added Water	Fines and Costs
Farmer-Wholesaler (3 Churns of Milk)	3.2% 4.1% 4.0%	£12/15/0
Farmer-Wholesaler (3 Churns of Milk)	24.0% 36.0% 32.0%	
Dairy Company (Bottles of Milk)	9.9% 10.0%	
Farmer-Wholesaler (2 Churns of Milk)	9.0% 5.6%	£11/8/0
Farmer-Wholesaler (3 Churns of Milk)	6.2% 6.7% 9.2%	
Farmer-Retailer (Bottle of Milk)	6.9%	£7/16/0

It was decided not to take legal action in respect of the other five samples of milk which were certified to contain between 1.5% and 3.4% added water. The percentages of added water in these samples were calculated on the Freezing Point Depression as the "appeal to cow" samples taken in respect of them were below the presumptive minimum standard of 8.5% in non-fatty solids.

Milk Samples Deficient in Fat.

The fat deficiencies in the majority of the samples were very small and no action was considered necessary other than to inform the vendors of the deficiencies and to instruct them to take great care in handling the milk.

Most of the samples of milk deficient in fat to an extent greater than 10% were followed up by going to the farms to supervise the milking and taking "appeal to cow" samples. Having regard to the results of the analysis of these "appeal to cow" samples and from investigations carried out, the deficiencies did not appear to be due to any deliberate abstraction of fat on the part of any of the suppliers but were due either to the fact that the cows were producing poor quality milk or to carelessness in the mixing and stirring of the milk before bottling, etc. Legal proceedings were not, therefore, taken in respect of any samples deficient in fat.

Informal Samples of MILK tested by the Sampling Officers.

Total number tested	..	..	..	738
Number found genuine	..	..	..	681
Deficient in Fat	..	..	..	34
Deficient in both Fat and Non-fatty Solids	..	..	..	1
Deficient in Non-fatty Solids	..	..	..	22

These samples were taken at schools, County Council homes, hospitals, canteens, small dairies, etc., and the suppliers of the milk were not informed of the sampling until the tests had been completed so that these informal samples could, where necessary, be followed up by taking official samples.

MISCELLANEOUS ARTICLES OF FOOD AND DRUGS

The samples procured and submitted to the Public Analyst comprised the following :—

Name of Article	No. Samples	Certified as adulterated or below standard
Ice Cream	58	4
Butter	34	1
Fruit Preserves	26	—
Canned and Bottled Vegetable, Soups, etc.	26	—
Vinegar	14	4
Soft Drinks	14	—
Salad Cream, Sauce, etc.	14	—
Tinned Meat and Fish, Shell Fish, etc. ..	11	2
Meat and Fish Paste	10	—
Cream	10	1
Margarine	8	—
Puddings, etc.	7	—
Tea and Coffee	6	—
Ground Almonds	6	—
Ice Lollies	6	1
Almond Marzipan	5	—
Butter Confectionery	5	1
Table Jelly and Gelatine	5	—
Sausages	5	1
Cake and Flour Mixtures	5	—
Cheese and Cheese Spreads	3	—
Sugar	3	1
Evaporated Milk	3	—
Lard, Cooking Fat and Suet	3	—
Pepper	3	—
Miscellaneous Foods	10	—
Miscellaneous Drugs	14	2
Alcoholic Spirits	2	1
	<u>316</u>	<u>19</u>

Legal proceedings under Section 2, Food and Drugs Act, 1955, were instituted in respect of the following three samples :—

Article	Nature of Irregularity	Fines and Costs
Butterscotch Tablets	Did not contain any Butter-fat	£36/10/0
Pickling Vinegar	89.5% deficient in Acetic Acid. It was not ' brewed ' Vinegar.	£7/10/0
Gin	Contained 5.2% Added Water.	£4/10/0

With regard to the remaining 16 samples of various articles of food and drugs on which adverse reports were made by the Public Analyst, the deficiencies or irregularities were not unduly serious and it was decided not to resort to legal action in respect of any of them.

Articles of Food containing extraneous matter.

A private purchaser brought to the department some Meat Pies which contained extraneous matter in the form of bits of paper, etc. Legal action under Section 2, Food and Drugs Act, 1955, was taken against the manufacturers and a fine of £25 was imposed.

A complaint was received from a householder of a bottle of milk containing pieces of glass. Also a bottle of milk containing a metal foil cap was delivered to a school in the County. Both bottles were supplied by the same dairy company. Legal proceedings were instituted under Section 2, Food and Drugs Act, 1955, in respect of the former bottle. A fine of £100 imposed at the Magistrate's Court was reduced by the Quarter Sessions Appeals Committee to £30 and the company was ordered to pay the costs of the appeal—£36/15/0.

It was not necessary to submit the above three samples to the Public Analyst.

Informal samples of Alcoholic Spirits tested by the Sampling Officers

Number of samples tested	..	..	..	38
Number suspected of being adulterated	..	..	..	1

The unsatisfactory sample was followed up immediately by taking an official sample which has already been referred to in this report.

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations

During the year visits were made at approximately fortnightly intervals to the five dairies in the County in respect of which licences were granted by the County Council authorising the use of the designation " Pasteurised " in relation to the milk heat-treated at these dairies.

The conditions at these dairies were found to be satisfactory and of the 248 samples of pasteurised milk taken for examination for adequate pasteurisation and keeping quality at the Public Health Laboratory, only six were reported to have failed to satisfy the prescribed tests.

The Milk (Special Designations) (Specified Areas) Orders

In addition to the eastern half of the County, where the provisions of the above Orders were already in force, parts of the western half of

the County were during the year designated as "specified areas" where the retail sale of milk not bearing one of the prescribed "special designations" is prohibited.

Observation was kept to see if there were any infringements of the Orders and a number of milk producers were seen retailing small quantities of milk in containers which were not properly sealed and marked with one of the appropriate designations—Tuberculin Tested, Pasteurised or Sterilised. The persons concerned were instructed to discontinue selling milk in such a manner.

Milk supplied to Schools under the Milk in Schools Scheme

Samples were taken for examination for bacteriological and compositional quality at approximately monthly intervals from all the milk vendors supplying milk to schools in the County.

The results of the bacteriological tests carried out at the Public Health laboratory are summarised as follows :—

			Pasteurised Milk	Raw Milk
Satisfactory	..	..	303	425
Unsatisfactory	..	..	27	79
			330	504

The samples tested for compositional quality have already been referred to in this report.

Eleven samples of raw milk were sent for biological examination. The report on one sample indicated that there was evidence of *Brucella abortus* infection. Nine samples were reported to be free from tuberculosis and *Brucella abortus* infection whereas the guinea pig inoculated with the remaining sample died before completion of the test.

The bacteriological and biological reports were forwarded to the Director of Education as they were received from the Public Health laboratory.

Other samples of Milk sent to the Public Health Laboratory

Seventy-three samples of milk taken at hospitals, children's homes, etc., were sent for bacteriological examination and five samples for biological examination.

Four samples failed the prescribed bacteriological tests and the reports on these were sent to the authorities concerned. Of the five samples examined for tuberculosis and *Brucella abortus*, three gave negative results but the tests could not be completed on the other two.

SANITARY CIRCUMSTANCES

At the time of the completion of this report only the District Medical Officers for Llanelly Borough and Newcastle Emlyn Urban District had submitted their reports on the sanitary circumstances of their areas. The following is a summary :—

Water Supply

Llanelly Borough.—Consideration was given to improving the filters and enlarging the main to the filter beds.

Sewage Disposal

Llanelly Borough.—A Scheme for the disposal of the Borough Sewage was under consideration at the end of the year.

There are no developments to report from Newcastle Emlyn Urban District.

